

ROGER TERRY # 341-358  
NOTICES OF INMATE RULE VIOLATIONS

August 9, 2007	Rule 113	p. 000003
September 12, 2007	Rules 104, 401, 405, 500	p. 000012
November 28, 2008	Rules 312, 400, 401	p. 000021
December 1, 2008	Rule 102	p. 000029
January 22, 2009	Rules 104, 400, 405	p. 000042
August 15, 2009	Rules 301, 305, 405	p. 000052
August 25, 2009	Rule 301 (Positive ETOH for 8/15 sample)	p. 000065
January 15, 2009	Rule 112	p. 000079
July 8, 2010	Rule 112	p. 000095

AUGUST 9, 2007 RULE 113



## MARYLAND DIVISION OF CORRECTION

ME 157

Appendix 1 to DCD 105-4

## NOTICE OF INMATE RULE VIOLATION AND DISCIPLINARY HEARING

Inmate Name: ROGER TERRY DOC#: 341338 Facility: MC15 Housing: BHCU  
Violation: Date: 8/9/07 Time: 720 AM/PM. Recommended charge: 113 (1135)

Reported facts: ON 08/09/07 I, OFFICER ANYAEGBU WAS ASSIGNED TO UTILITY. AT APPROXIMATELY 720 AM, I FOUND TWO (2) HOME MADE STUNGES ON INMATE ROGER TERRY DOC #341358, RE 234 DURING A STRIP SEARCH. THE TWO (2) STUNGES WERE TUCKED UNDER HIS TESTICLES. I HAD PRIOR TO THE STRIP SEARCH CHECKED THE AILEA AND FOUND NO WEAPONS OR CONTRABANDS. AILEA WAS CHECKED AT 705 AM AND INMATE ROGER TERRY DOC #341358, RE 234 WAS THE FIRST INMATE TO TAKEN INTO THE SECURED ROOM. INMATE WAS POSITIVELY IDENTIFIED BY HAS ID.

I solemnly affirm under the penalties of perjury and upon personal knowledge that the facts set forth in the above report are true.

Reporting Staff: ANYAEGBU COI [Signature] 08/09/07  
Print Name and Title Signature Date

1. **Supervisory Review:** The above report has been reviewed with the following action taken:

- a. **Action Taken:** ☒ Formal Hearing ☒ Administrative Segregation Assignment ☐ Use of Force ☐ Contraband Disposition ☐ Incident Report  
b. Rule Violation Charged: 113  
c. ☐ **Informal Disposition:** Rule Violation: \_\_\_\_\_ Sanction: \_\_\_\_\_ Effective Date: \_\_\_\_\_  
d. **Informal Service:** I understand by my signature below that: I waive a hearing by a hearing officer on the offenses charged, this report and informal action will be placed on my OBSCIS & in my facility file records, and where applicable I accept the offer of informal disposition sanction.

Inmate Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

e. **Comments:** Placed on Segregation - Pending Adjustment Hearing.

f. **Shift Supervisor:** L.S. Hudson [Signature] 8/11/07  
Print Name and Title Signature Date

2. **Administrative Segregation Assignment Review:** The recommendation has been reviewed and I ☐ Approve or ☐ Disapprove.  
Shift Commander: L. Montgomery [Signature] 8/11/07  
Print Name and Title Signature Date

3. **Formal Hearing Service:** A. Preparation: You are entitled to 24 hours from the date and time of receipt of this notice before you may appear before a hearing officer to answer to the offenses charged in this notice. B. Representation: You may request representation by staff or a qualified inmate from the general population of this facility if you indicate their name below. A failure to list a name below shall be deemed at your hearing as a waiver of your right to representation. C. Witnesses: You may request for your hearing any witness who is relevant, material, & non-cumulative that may include staff and/or the reporting staff if you indicate them by name below. A failure to list by name below shall be deemed at your hearing as a waiver of your right to call witnesses.

Representative: Larry Pratt Witness: \_\_\_\_\_

4. **Appeal:** You may appeal a guilty decision and/or sanction in writing to the warden within 15 calendar days of receipt for the hearing officer's decision.  
5. **Service of Notice:** Signature below is only acknowledgment for receipt of notice copy. Refusal to sign is deemed waiver of service obligation by the facility.

**Waiver of 24 Hour Notice:** ☐ I waive 24 hour notice and request to appear before a hearing officer as soon as possible.

Inmate's Signature: Roger Terry DOC#: 341-358 Date: 8/11/07

☒ Inmate ID verified ☐ Copy given but inmate refused to sign for service ☐ Inmate requested no rep. or witness at service

Notice Served By: M. Brown CO II [Signature] 8-11-07 2:40 p.  
Print Name and Title Signature Date and Time

Distribution:

White Copy—Base File

Yellow Copy—Inmate

Pink Copy—Facility

DC Form 105-4a (Rev. Feb. 07)

EXHIBIT 8

000003

MARYLAND CORRECTIONAL INSTITUTION-JESSUP  
NOTICE OF INCIDENT (MATTER OF RECORD) (Circle One)

TIME: 720 A.M./P.M.

DATE: 08/09/07

SECTION OR AREA OF INSTITUTION WHERE OCCURRED:

B HOUSING UNIT

CONTRABAND DISCOVERY/SEIZURE:

TWO (2) STRINGES

IF SO, DISPOSITION OF THE CONTRABAND:

CONTRABAND CONTROL BOX

FACTS:

ON 08/09/07, I, OFFICER ANYA EGBY WAS ASSIGNED TO UTILITY. AT APPROXIMATELY 720 AM, I FOUND TWO (2) STRINGES ON INMATE ROGER TERRY DOC #341358, BE 234 DURING A STRIP SEARCH. THE TWO (2) STRINGES WERE TUCKED UNDER HIS TESTICLES. I HAD PRIOR TO THE STRIP-SEARCH CHECKED THE AREA AND FOUND NO WEAPONS OR CONTRABANDS. AREA WAS CHECKED AT 705 AM, AND INMATE ROGER TERRY DOC #341358, BE 234 WAS THE FIRST INMATE TO BE TAKEN INTO THE SECURED ROOM. INMATE WAS POSITIVELY IDENTIFIED BY HIS STATE ISSUED ID CARD.

END REPORT

SHIFT:

7X3

REPORTING OFFICER

*Anya Eby*  
signature

POST

UTILITY

SUPERVISOR:

*LT. Hubson*  
signature

DATE:

8.9.07

ACTION TAKEN:

Attached to Ticket

MARYLAND CORRECTIONAL INSTITUTION-JESSUP  
NOTICE OF INCIDENT / MATTER OF RECORD (Circle One)

TIME: 7:20 A M. / P. M.

DATE: 8/9/07

SECTION OR AREA OF INSTITUTION WHERE OCCURRED: \_\_\_\_\_

CONTRABAND DISCOVERY/SEIZURE: \_\_\_\_\_

IF SO, DISPOSITION OF THE CONTRABAND: \_\_\_\_\_

FACTS:

On the above date and time I Sgt. Brackman was assigned to BHU when Officer Anyashe called me for assistance in the Control office where he was strip searching inmate Terry Roger #341-358. Inmate Roger refuse to let Mr. Anyashe see what was under his testicles it was a home made syringe. Inmate Roger removed it from under his testicle and gave it to Mr. Anyashe it remain in his custody and I submitted this report.

SHIFT: 7x3

REPORTING OFFICER

Sgt. Brackman  
signature

POST

BHU

SUPERVISOR:

LT. Hudson  
signature

DATE:

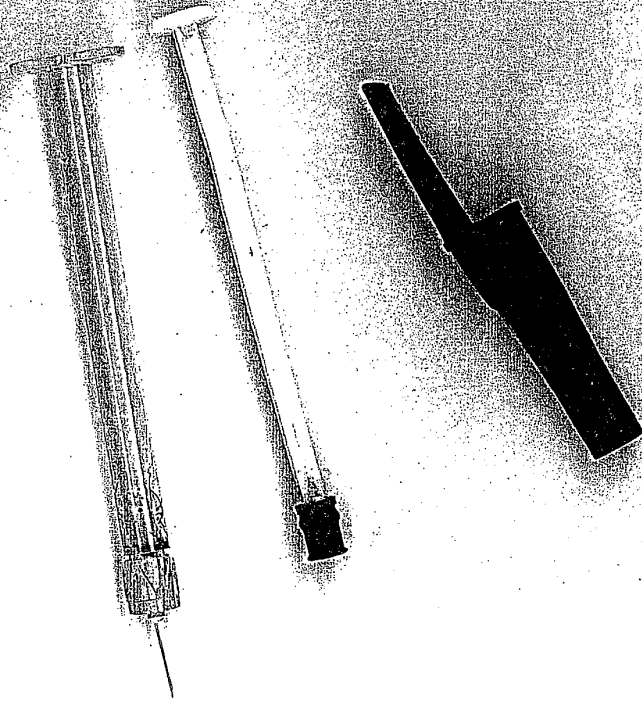
11 August 2007

ACTION TAKEN:

Attached to Notice Of Rule Violation, dtd. 8/9/07

CC: Assistant Warden, Security Chief  
File

⊛



FOUND ON IMMEDIATE DOOR TERRY DOCH 341358  
BE 234 BY OFFICER ANYA EGBU. THE  
TWO (2) ~~HOMES~~ ~~MAD~~ STANCHES WERE  
TUCKED UNDER HIS TESTICLES.

08/09/07

**INMATE HEARING RECORD**

Appendix 3 to DPSCSD 105-5

Case: N/A  
Heard With: N/A

**Department of Public Safety and Correctional Services****INMATE HEARING RECORD**

Name: Roger Terry # 341358 Date of Violation 8/9/07

**I. PRELIMINARY MATTERS:**

Date of Appearance: 8/23/07 Time: 9:20 AM

Inmate Representation: ☒ No ☐ Yes Name: Larry Bratt waived☐ Denied Reason:Inmate Witness: ☐ No ☒ Yes Name(s):☐ Denied Reason:**Inmate Pleadings:**

Rule	Not Guilty	No Plea	Guilty
113	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**II. EVIDENTIARY MATTERS: Hearing Date: 8/23/07**

Institutional Presentation (List): Notice of Inmate Rule Violation (pages 1)  
submitted by Officer Anyaegbu, Matter of records Anyaegbu, Sgt. Bradshaw, ID and copy of  
syringes and Institution Rep. Sgt. Lucas

Inmate Presentation (List): Individual voluntarily pled guilty to Rule 113 .  
Individual admits his guilt to the rule violation (s) and waives his hearing rights. H.O. accepts  
guilty plea and finds that the guilty plea is merited.

## INMATE HEARING RECORD

Appendix 3 to DPSCSD 105-5

Case: N/A

Heard With: N/A

## Department of Public Safety and Correctional Services

INMATE HEARING RECORD  
(Hearing Officer Decision)

Name: Roger Terry # 341358 Date of Violation: 8/9/07

## HEARING OFFICER'S DECISION:

Rule	Guilty	Not Guilty	IR	Dismissed	Informal Disposition Sanction
113	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## SANCTIONS IMPOSED:

Matrix Adjustment History: vf Effective Date: August 9, 2007

Rule	Category	Seg. Days	CR Days	CC/CS	Revoke GCC
113	I	30	0	CC	0

SEG = Segregation CR = Cell Restriction CC = Concurrent CS = Consecutive GCC = Good Conduct Credits

☐ Override-Reasons:☐ Other Sanctions:

Reason for Decision (state evidence weighed and findings): After reading the report of the staff (and hearing testimony) about this reported incident and weighing all of the information submitted (whether photos, matters of records, supporting documents) as provided if applicable to this reported incident, Individual voluntarily pled guilty to Rule 113. Individual admits his guilt to the rule violation (s) and waives his hearing rights. H.O. accepts guilty plea and finds that the guilty plea is merited.

*Ya Suwara Jaxon*

INMATE HEARING RECORD

Appendix 3 to DPSCSD 105-5

HEARING OFFICER OF RECORD:

La-Tricia Taylor  
H.O La-Tricia Taylor

August 23, 2007

DATE

I hereby acknowledge receipt of the hearing officer's decision:

Roger Terry341358

DATE

Distribution: Institution  
Inmate  
Report Staff

## MARYLAND DIVISION OF CORRECTION

## Hearing Decision Review

Inmate Name Terry, Roger DOC# 341-358 Date of Decision: 8/23/07  
 Rule Violation: Guilty 113

I. **Review:** I have reviewed the decision in your case and take the following action:

- ☒ Decision and sanction(s) affirmed.  
☐ Sanction(s) imposed is modified (see Section III).  
☐ Decision referred to Commissioner for review.  
☐ **The decision is remanded for new hearing due to the following reason:**  
☐ By my order for clarification of the record (see Section III).  
☐ By order of the: ☐ Commissioner, ☐ Secretary of DPSCS, or ☐ court (see Sections III and V).

II. **Reviewing Authority Signature:**

CHAKINS WARD [Signature] 9/  
 Print Name & Title Signature Date

III. **Comments:**

IV. **Service Receipt Record:** A failure to sign for receipt shall be deemed a waiver of Facility's service obligation.

Inmate Signature: Copy Given Date: 8/23  
☒ Inmate ID verified at service and inmate refused to sign for service receipt.  
 Served By: D. S. [Signature] Title COIT Date 8/23 Time 1:00 ☒ A.M. ☐ P.M.

V. **Remand Hearing:** Prior to appearance, you are entitled to 24 hours from the date and time of this notice to prepare for your scheduled hearing. You are permitted to request a qualified (per directive procedures) staff or inmate to represent you or as a witness (including reporting staff) for the purposes of your hearing if you list them by name below. Failure to request representation or witnesses below at the time of service shall be deemed a waiver of your right for representation or witnesses at the time of your hearing. You may appeal any guilty finding and/or sanction to the warden within 15 days of the date for receipt of the hearing officer's decision.

Representative: \_\_\_\_\_

Witness: \_\_\_\_\_

Distribution: White – Base File Yellow – Inmate

P/1

BSCIS OFFENDER FUNCTION  
MAINTAIN INFRACTIONS DATA

PAGE: 2  
DATE: 12/03/07  
TIME: 16:16

DOC #: 341358 TERRY ROGER DALE  
ACTION: \_\_\_\_ INFR DT/TIME: 08 09 2007 / 07 20 INMATE SERVED: 08 11 2007 / 14 40  
INSTITUTION : MCIJ MD CORR INS-JES SCHEDULED HEARING: 08 16 2007  
RULES CHARGED : 113 \_\_\_\_ CUR SEC: \_\_\_\_  
INFORMAL DISP : OFFERED N ACCEPTED BY INMATE N WITNESS REQUESTED N  
WRITTEN BY : OFC. ANYAEGBU INFRAC ENTERED BY: FISHER M  
HEARING DATE/TIME: 08 23 2007 / 09 20 ENTERED BY: DAUGHERTY N  
DISPOSITION : GUILTY Y NOT GUILTY \_ DISMISSED \_ REDUCE TO INCIDENT \_  
GUILTY OF RULES : 113 \_\_\_\_  
SANCTION : SEG 0030 DAYS FR 08 09 2007 TO 09 07 2007 END DATE 02 08 2008  
: CELL \_\_\_\_ DAYS FR \_\_\_\_ TO END DATE 03 08 2008  
: LOV \_\_\_\_ DAYS FR \_\_\_\_ TO END DATE  
INDEFINITE LOSS VISITS FLAG: \_  
DIM REVOKED: GCC \_\_\_\_ DAYS SPC \_\_\_\_ DAYS HO NAME: TAYLOR  
COMMENTS : \_\_\_\_\_  
COMMENTS : \_\_\_\_\_  
WARDENS ACTION: AFFIRMED Y REDUCED \_ NEW PROC ORDERED \_ DATE 09 10 2007  
DATE ENTERED: 10/04/07 ENTERED BY: SPARROW, K  
WARDENS COMMENTS: \_\_\_\_\_  
\* INMATE HAS +996 GCC AND +32 SPC AVAILABLE \*\*(+1028)\*\*  
- INQUIRY ONLY.

SEPTEMBER 12, 2007      RULES 104, 401, 405, 500



MARYLAND DIVISION OF CORRECTION  
NOTICE OF INMATE RULE VIOLATION AND DISCIPLINARY HEARING

4.C.B. 107  
Appendix 1 to DCD 105-4

Inmate Name: Roger Terry DOC#: 341-358 Facility WCF Housing: 5-A-22B  
Violation: Date: 9/12/07 Time: 1425hrs AM/PM Recommended charge: 104, 401, 403, 405

Reported facts: On 9/12/07, I, E. Burkey COII, was assigned to Housing Unit 5-D-wing. At approximately 1425hrs. the inmates were exiting the Housing Unit for small yard. As inmate Roger Terry DOC #341-358 5-A-22B was exiting A-wing he shouted at me "I want my property." I informed inmate Terry that his property would be distributed by the property officer. Inmate Terry then yelled "I want my fucking property now." Then he yelled "You all are a bunch of bitches and cowards up here, I ain't going into any cell until I get my property." I ordered inmate Terry to display his state identification card. Terry stated "I ripped the fucking thing up." I ordered Terry to place his hands behind his back in order to be handcuffed. Terry yelled "Try to handcuff me and I will fuck up all you bitches." Inmate Terry was then handcuffed. Terry yelled "You bitches are going

I solemnly affirm under the penalties of perjury and upon personal knowledge that the facts set forth in the above report are true.

Reporting Staff: E. Burkey COII E. Burkey COII 9/12/07  
Print Name and Title Signature Date

1. **Supervisory Review:** The above report has been reviewed with the following action taken:

- a. **Action Taken:** ☒ Formal Hearing ☒ Administrative Segregation Assignment ☐ Use of Force ☐ Contraband Disposition ☐ Incident Report  
b. Rule Violation Charged: 104, 401, 405, 500  
c. ☐ Informal Disposition: Rule Violation: \_\_\_\_\_ Sanction: \_\_\_\_\_ Effective Date: \_\_\_\_\_  
d. **Informal Service:** I understand by my signature below that: I waive a hearing by a hearing officer on the offenses charged, this report and informal action will be placed on my OBSCIS & in my facility file records, and where applicable I accept the offer of informal disposition sanction.

Inmate Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

e. **Comments:** Nature of Incident warrants formal hearing.

f. **Shift Supervisor:** T. BENSTADT COI T. Benstad COI 9-12-07  
Print Name and Title Signature Date

2. **Administrative Segregation Assignment Review:** The recommendation has been reviewed and I ☒ Approve or ☐ Disapprove.

Shift Commander: J. True COC J. True 9-12-07  
Print Name and Title Signature Date

3. **Formal Hearing Service:** A. Preparation: You are entitled to 24 hours from the date and time of receipt of this notice before you may appear before a hearing officer to answer to the offenses charged in this notice. B. Representation: You may request representation by staff or a qualified inmate from the general population of this facility if you indicate their name below. A failure to list a name below shall be deemed at your hearing as a waiver of your right to representation. C. Witnesses: You may request for your hearing any witness who is relevant, material, & non-cumulative that may include staff and/or the reporting staff if you indicate them by name below. A failure to list by name below shall be deemed at your hearing as a waiver of your right to call witnesses.

Representative: \_\_\_\_\_ Witness: \_\_\_\_\_

4. **Appeal:** You may appeal a guilty decision and/or sanction in writing to the warden within 15 calendar days of receipt for the hearing officer's decision.  
5. **Service of Notice:** Signature below is only acknowledgment for receipt of notice copy. Refusal to sign is deemed waiver of service obligation by the facility.

**Waiver of 24 Hour Notice:** ☐ I waive 24 hour notice and request to appear before a hearing officer as soon as possible.

Inmate's Signature: Roger Terry DOC#: 341-358 Date: 9-12-07

☒ Inmate ID verified ☐ Copy given but inmate refused to sign for service ☐ Inmate requested no rep. or witness at service

Notice Served By: J. Henderson J. Henderson COII 9/12/07 2245  
Print Name and Title Signature Date and Time

Distribution: White Copy—Base File Yellow Copy—Inmate Pink Copy—Facility  
DC Form 105-4a (Rev. Feb. 07)

EXHIBIT 8

000013

Maryland Division of Correction  
NOTICE OF INMATE RULE VIOLATION AND DISCIPLINARY HEARING  
(Continuation Sheet)

Inmate Name: Roger Terry # 341-358 Date of Violation: 9/12/07

to have problems from me no matter where you put me." Inmate  
Terry was informed of this adjustment and identified by his  
state identification card.

Inmate's Signature Roger Terry # 341-358 Date 9-12-07  
Notice Served By J. H. [Signature] Title COIT Date 9/12/07 Time 2245

Distribution: White copy - Base File Yellow copy - Inmate Pink copy - Institution

WESTERN CORRECTIONAL INSTITUTION  
Cumberland, Maryland

INFORMATION REPORT FORM

DATE: 12th September 2007  
APPROXIMATE TIME: 1925 HRS

DISTRIBUTION: SHIFT COMMANDER

INCIDENT REFERENCE HEADING: Disruptive Inmate

INMATE'S NAME, NUMBER, HOUSING: Terry, Roger #341358 HU 5 B 22B

INCIDENT DESCRIPTION (WHO, WHAT, WHERE, WHEN, HOW)? On 12th September at approximately 1925 HRS I Officer Crawford COII was escorting the Med Nurse on A-Tier when I heard a confrontation on the bottom of A- Tier Between Officer Burkey COII and Inmate Terry, Roger #341358 HU 5 B 22B. I Officer Crawford COII Heard Inmate Terry tell Officer Burkey COII " I want my fucking property now" then he said "You are all a bunch of bitches and cowards up here, I ain't going into the cell until I get my property." At that time Officer Burkey COII ordered Inmate Terry to place his hands behind his back. Inmate Terry replied "try to handcuff me and I will fuck up all you bitches." Inmate Terry was then handcuffed and I Officer Crawford COII escorted him to Housing Unit 5 without further incident.

A. Crawford COII  
REPORTING OFFICER PRINTED NAME / SIGNATURE

DISPOSITION OF INCIDENT:

Information Report Accompanied  
Notice of Infraction

DISTRIBUTION:

ASSISTANT WARDEN  
SECURITY CHIEF  
UNIT MANAGER  
CASE MANAGER

PSYCHOLOGY DEPT.  
MEDICAL DEPT.  
REPORTING OFFICER  
HEARING OFFICER  
MAINTENANCE

INMATES COPY  
8-4 SHIFT  
4-12 SHIFT  
12-8 SHIFT  
OTHER

SUPERVISOR PRINTED NAME AND TITLE

## INMATE HEARING RECORD

Appendix 3 to DPSCSD 105-5

Case: Terry, Roger # 3-1358

Heard With:

**Department of Public Safety and Correctional Services**  
**INMATE HEARING RECORD**  
**(Hearing Officer Decision)**

Name: # Date of Violation: 9/12/07

**HEARING OFFICER'S DECISION:**

Rule	Guilty	Not Guilty	IR	Dismissed	Informal Disposition Sanction
104	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
405	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SANCTIONS IMPOSED:**

Matrix Adjustment History: POOR Effective Date: 9-12-07

Rule	Category	Seg. Days	CR Days	CC/CS	Revoke GCC
104	I	150			--0--
405	IV	60		CC	--0--

SEG = Segregation CR = Cell Restriction CC = Concurrent CS = Consecutive GCC = Good Conduct Credits

☐ Override-Reasons:☐ Other Sanctions:

Reason for Decision (state evidence weighed and findings): HO accepts negotiated plea agreement. Def understands the ramifications of his guilty plea and agrees to waiver his hearing/rights. END AD>

**INMATE HEARING RECORD**

Appendix 3 to DPSCSD 105-5

Case: Terry, Roger # 5-1358

Heard With:

**Department of Public Safety and Correctional Services  
INMATE HEARING RECORD**

Name: # Date of Violation 9/12/07

**I. PRELIMINARY MATTERS:**

Date of Appearance: 9/17/07 Time: 11:30 AM

Inmate Representation: ☒ No ☐ Yes Name: self☐ Denied  
Reason:Inmate Witness: ☒ No ☐ Yes Name(s):none☐ Denied  
Reason:

Inmate Pleadings:

Rule	Not Guilty	No Plea	Guilty
104	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
405	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**II. EVIDENTIARY MATTERS: Hearing Date: 9/17/07**

Notice of Rule Violation form: Two pg Notice, one pg Info by Crawford are both made part of the Record.

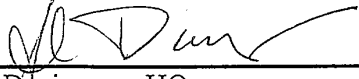
Preliminary Issues presented by Def: none presented

Statement by Def:

**INMATE HEARING RECORD**

Appendix 3 to DPSCSD 105-5

**HEARING OFFICER OF RECORD:**

  
\_\_\_\_\_  
Al Davis, HO 9/17/2007  
DATE

I hereby acknowledge receipt of the hearing officer's decision:

\_\_\_\_\_  
Roger Terry #341358 DATE

Distribution: Institution  
Inmate  
Report Staff

## MARYLAND DIVISION OF CORRECTION

## Hearing Decision Review

infraction 9/12/07

Inmate Name Roger Terry 4C13 DOC# 341358 Date of Decision: heard 9/17/07Rule Violation: Guilty rules 104 & 405I. **Review:** I have reviewed the decision in your case and take the following action:

- ☒ Decision and sanction(s) affirmed.
- ☐ Sanction(s) imposed is modified (see Section III).
- ☐ Decision referred to Commissioner for review.
- ☐ **The decision is remanded for new hearing due to the following reason:**
- ☐ By my order for clarification of the record (see Section III).
- ☐ By order of the: ☐ Commissioner, ☐ Secretary of DPSCS, or ☐ court (see Sections III and V).

II. **Reviewing Authority Signature:**

<u><i>Robert P. Shuman</i></u>	<u><i>Warden</i></u>	<u>10-5-07</u>
Print Name & Title	Signature	Date

III. **Comments:**IV. **Service Receipt Record:** A failure to sign for receipt shall be deemed a waiver of the Facility's service obligation.

Inmate Signature: *Roger Terry* Date: 10-30-07

☐ Inmate ID verified at service and inmate refused to sign for service receipt.

Served By: *[Signature]* Title Co 2 Date 10-30-07 Time 1301 ☐ A.M. ☒ P.M.

V. **Remand Hearing:** Prior to appearance, you are entitled to 24 hours from the date and time of this notice to prepare for your scheduled hearing. You are permitted to request a qualified (per directive procedures) staff or inmate to represent you or as a witness (including reporting staff) for the purposes of your hearing if you list them by name below. Failure to request representation or witnesses below at the time of service shall be deemed a waiver of your right for representation or witnesses at the time of your hearing. You may appeal any guilty finding and/or sanction to the warden within 15 days of the date for receipt of the hearing officer's decision.

Representative: \_\_\_\_\_

Witness: \_\_\_\_\_

Distribution: White - Base File

Yellow - Inmate



## Department of Public Safety and Correctional Services

### Division of Correction Western Correctional Institution

13800 McMULLEN HIGHWAY, SW • CUMBERLAND, MARYLAND 21502  
(301) 729-7000 • FAX (301) 729-7024 • TTY USERS 1-800-735-2258 • www.dpscs.state.md.us

STATE OF MARYLAND

MARTIN O'MALLEY  
GOVERNOR

ANTHONY G. BROWN  
LT. GOVERNOR

GARY D. MAYNARD  
SECRETARY

G. LAWRENCE FRANKLIN  
DEPUTY SECRETARY

DIVISION OF CORRECTION

J. MICHAEL STOFFER  
ACTING COMMISSIONER

VACANT  
DEPUTY COMMISSIONER

WESTERN  
CORRECTIONAL  
INSTITUTION

BOBBY SHEARIN  
WARDEN

HARRY B. MURPHY, Ph.D.  
ASSISTANT WARDEN

FRANK B. BISHOP, JR.  
CHIEF OF SECURITY

### ADMINISTRATIVE ACTION

TO: Roger Terry #341358 HU4A38A      DATE: 10/15/07


The recommendations of the Reduction of Violence Committee on the Adjustment Infraction of 9/12/07 have been evaluated. It has been determined to impose the following Administrative Action:

Hearing Date: 9/17/07

Original Sentence: Guilty rule 104 – Cat I – 140 days seg;

### Administrative: Action:

The ROV is imposing an administrative action upon your release from segregation to general population. Your conduct posed a serious threat to the security and orderly running of WCI. Administratively you will be restricted to your assigned room for 30 days to ensure that you are in compliance with WCI rules and regulations. Your Unit Manager will discuss with you the specifics of this restriction and any exceptions therein.

  
Bobby Shearin, Warden

BPS/rme

cc: File w/Adjustment Infraction  
Gate House Reception (for visiting sanctions only)  
Segregation Unit Officer  
Case Management (2)  
Commitment  
Traffic Office  
ROV Committee- AW (for additional sanctions only)

NOVEMBER 28, 2008

RULES 312, 400, 401



## MARYLAND DIVISION OF CORRECTION

Appendix 1 to DCD 105-4

## NOTICE OF INMATE RULE VIOLATION AND DISCIPLINARY HEARING

Inmate Name: Terry, Roger DOC#: 341358 Facility WCI Housing: 4-B-2  
Violation: Date: 11/28/2008 Time: 0830 hrs AM/PM. Recommended charge: 312, 400, 401

**Reported facts:** On November 28, 2008 at approximately 0830 hrs, I officer S. Wilson COII along with SGT Engle, Ofc Linaburg and Ofc Faulkner was tasked to place inmate Terry, Roger 341358 in 4B2 contingency. Inmate Terry refused to allow his cell buddy inmate Michael, Warner 307136 back into his assigned cell 4B31. Myself, SGT Engle and Ofc Faulkner escorted inmate Terry to HU4B 2, where he was given strip search instructions by Ofc Linaburg. When Ofc Linaburg uncuffed inmate Terry's left hand, inmate refused to place his on hand on the wall. Inmate continued to refuse and resist all orders and efforts by Ofc Faulkner to place inmate Terry's hand on the wall. Inmate Terry became more aggressive and continued to resist our efforts and orders to comply. At this time I applied pepper spray MK-40 L3 to his facial area. Inmate Terry was then placed on the cell floor where Ofc Linaburg secured inmate Terry's left hand with handcuffs and then he was escorted to HU4 medical room where medical staff was waiting. Inmate Terry refused medical treatment and a shower. Inmate Terry was then escorted back to 4B2 without incident. He was identified by personal recognition and tier roster.

I solemnly affirm under the penalties of perjury and upon personal knowledge that the facts set forth in the above report are true.

Reporting Staff: S. Wilson COII [Signature] 11/28/2008  
Print Name and Title Signature Date

1. **Supervisory Review:** The above report has been reviewed with the following action taken:

- a. **Action Taken:** ☒ Formal Hearing ☐ Administrative Segregation Assignment ☐ Use of Force ☐ Contraband Disposition ☐ Incident Report  
b. Rule Violation Charged: 312, 400, 401  
c. ☐ **Informal Disposition: Rule Violation:** \_\_\_\_\_ **Sanction:** \_\_\_\_\_ **Effective Date:** \_\_\_\_\_  
d. **Informal Service:** I understand by my signature below that: I waive a hearing by a hearing officer on the offenses charged, this report and informal action will be placed on my OBSCIS & in my facility file records, and where applicable I accept the offer of informal disposition sanction.

Inmate Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

e. **Comments:** \_\_\_\_\_

f. **Shift Supervisor:** DW Norris Col [Signature] 11/28/08  
Print Name and Title Signature Date

2. **Administrative Segregation Assignment Review:** The recommendation has been reviewed and I ☒ **Approve** or ☐ **Disapprove**.

Shift Commander: [Signature] [Signature] 11/28/08  
Print Name and Title Signature Date

3. **Formal Hearing Service:** A. **Preparation:** You are entitled to 24 hours from the date and time of receipt of this notice before you may appear before a hearing officer to answer to the offenses charged in this notice. B. **Representation:** You may request representation by staff or a qualified inmate from the general population of this facility if you indicate their name below. A failure to list a name below shall be deemed at your hearing as a waiver of your right to representation. C. **Witnesses:** You may request for your hearing any witness who is relevant, material, & non-cumulative that may include staff and/or the reporting staff if you indicate them by name below. A failure to list by name below shall be deemed at your hearing as a waiver of your right to call witnesses.

Representative: \_\_\_\_\_ Witness: Charles R/W Michael Warner

4. **Appeal:** You may appeal a guilty decision and/or sanction in writing to the warden within 15 calendar days of receipt for the hearing officer's decision.  
5. **Service of Notice:** Signature below is only acknowledgment for receipt of notice copy. Refusal to sign is deemed waiver of service obligation by the facility.

**Waiver of 24 Hour Notice:** ☐ I waive 24 hour notice and request to appear before a hearing officer as soon as possible.

Inmate's Signature: Roger Terry DOC#: 341-358 Date: 11-28-08

☒ **Inmate ID verified** ☐ **Copy given but inmate refused to sign for service** ☐ **Inmate requested no rep. or witness at service**

Notice Served By: S.L. Linaburg con [Signature] 11/28/08 13<sup>30</sup>  
Print Name and Title Signature Date and Time

Distribution:

White Copy—Base File

Yellow Copy—Inmate

Pink Copy—Facility

DC Form 105-4a (Rev. Feb. 07)

EXHIBIT 8

000022

Maryland Division of Correction  
INMATE HEARING RECORD

Name: Terry, Roger DOC# 341358 Violation Date: 11/28/08

Hearing Officer of Record: Davis  
Heard With: N/A

## I: PRELIMINARY MATTERS:

Defendant inmate appearance: Date: 12/8/2008 Time: 9:35 AM

The hearing officer of record shall document the following for the record:

1. List any request for inmate representation: ☒ Representation waived by inmate.  
☐ Yes: Name: waived

NOTE: If request is denied for procedural cause, state below why:

2. List any request by name for a witness: ☒ Witness(es) waived by inmate.

a: ☐ Yes: Name: waived

b: List requested witness(es) and state defendant's proffer as to testimony for the witness(es):

c: If inmate witness(es) request is denied for procedural cause, state below why:

3: State any motions, evidence requests, etc. and hearing officer's decision as to such: none presented--Def wished to plead guilty to rule[s] as indicated

4: State any request for postponement and hearing officer's decision as to such:

Name: Terry, Roger DOC# 341358 Violation Date: 11/28/08

**II. EVIDENTIARY MATTERS:**

a. Hearing Date: 12/8/2008

b. Name of Facility Representative: Slate

c. Defendant Inmate Plea:

Rule	Not Guilty	No Plea	Guilty
312	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
400	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
401	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d. Argument by Parties and Testimony of Witnesses:

Maryland Division of Correction  
INMATE HEARING RECORD

Name: Terry, Roger # 341358 Date of Violation: 11/28/08

Hearing Officer of Record: Davis  
Heard With: N/A

## III: HEARING OFFICER DECISION:

Rule	Guilty	Not Guilty	IR	Dismissed	Informal Disposition	Sanction
312	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
400	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
401	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

## IV: HEARING OFFICER WRITTEN FINDINGS:

A. State all evidence ( list reports, testimony, physical evidence, etc.)  
weighed and considered at hearing: One pg Notice made part of the  
Record

B. Based on evidence above, state fact findings:  
HO finds Def. is knowingly pleading guilty to the rule[s] indicated.

C. Based on fact finding above, state your decision:  
HO accepts negotiated plea agreement. Def understands the ramifications of his  
guilty plea and agrees to waiver his hearing/rights. Def put forward no issues. END AD>

Name: Terry, Roger DOC# 341358 Violation Date: 11/28/08

**V. SANCTIONS:**

Matrix Adjustment History: POOR Effective Date: 11-28-08

Rule	Category	Seg. Days	GR Days	CC/CS	Revoke GCC
312	III	90			--0--
400	IV	60		CC	--0--
401	IV	60		CC	--0--

SEG = Segregation CR = Cell Restriction CC = Concurrent CS = Consecutive GCC = Good Conduct  
Credits

☐ Override- State Reasons:

☐ Other Sanctions:

VI. RECEIPT OF HEARING RECORD:

Date of Hearing: 12/8/2008

Date of Violation: 11/28/08

Teleconferenced Hearing: N/A

Name and Title of Serving Staff:

\_\_\_\_\_  
DATE

By signing I hereby acknowledge receipt of the hearing officer's decision:

\_\_\_\_\_  
DATE

R Terry #

Distribution: Institution  
Inmate  
Report Staff

## MARYLAND DIVISION OF CORRECTION

## Hearing Decision Review

infraction 11/28/08

Inmate Name Roger Terry 4A43 DOC# 341358 Date of Decision: heard 12/8/08Rule Violation: Guilty rules 312, 400, & 401I. **Review:** I have reviewed the decision in your case and take the following action:

- ☒ Decision and sanction(s) affirmed.  
☐ Sanction(s) imposed is modified (see Section III).  
☐ Decision referred to Commissioner for review.  
☐ **The decision is remanded for new hearing due to the following reason:**  
☐ By my order for clarification of the record (see Section III).  
☐ By order of the: ☐ Commissioner, ☐ Secretary of DPSCS, or ☐ court (see Sections III and V).

II. **Reviewing Authority Signature:**

Bobby P. Shuman Warden 12/31/08  
 Print Name & Title Signature Date

III. **Comments:**IV. **Service Receipt Record:** A failure to sign for receipt shall be deemed a waiver of the Facility's service obligation.Inmate Signature: Roger Terry Date: 1-6-09☐ Inmate ID verified at service and inmate refused to sign for service receipt.Served By: [Signature] Title [Signature] Date 1-6-09 Time 4:45 ☐ A.M. ☒ P.M.

V. **Remand Hearing:** Prior to appearance, you are entitled to 24 hours from the date and time of this notice to prepare for your scheduled hearing. You are permitted to request a qualified (per directive procedures) staff or inmate to represent you or as a witness (including reporting staff) for the purposes of your hearing if you list them by name below. Failure to request representation or witnesses below at the time of service shall be deemed a waiver of your right for representation or witnesses at the time of your hearing. You may appeal any guilty finding and/or sanction to the warden within 15 days of the date for receipt of the hearing officer's decision.

Representative: \_\_\_\_\_

Witness: \_\_\_\_\_

Distribution: White - Base File

Yellow - Inmate

DECEMBER 1, 2008

RULE 102



MARYLAND DIVISION OF CORRECTION

Appendix 1 to DCD 105-4

NOTICE OF INMATE RULE VIOLATION AND DISCIPLINARY HEARING

Inmate Name: Roger Terry DOC#: 341358 Facility: WCI Housing: HU4 A43B  
Violation Date: 12/1/08 Time: 1730 AM/PM Recommended charge: 102

Reported facts: On 12-1-08, I, Ofc. A. MOSES, COII WAS assigned to housing unit 4 (A-wing). At approximately 1730, I, Ofc. A. MOSES WAS conducting a wing walk on the mezzanine level. As I approached cell 43 I observed the above named inmates standing with his back towards the cell window facing in my direction. Inmate Terry WAS sweating profusely And breathing heaving. His cell partner (James Logan) was bleeding from the face. I immediately asked what happened. Inmate Terry replied, "Get him out of here now!" I ordered both inmates to cuff-up, failure to do so would result in a use of force. Inmate Roger Terry complied with my orders. Inmate Terry WAS removed without incident.

I solemnly affirm under the penalties of perjury and upon personal knowledge that the facts set forth in the above report are true.

Reporting Staff: A. MOSES, COII A. Moses, COII Dec 1, 2008  
Print Name and Title Signature Date

1. **Supervisory Review:** The above report has been reviewed with the following action taken:

- a. **Action Taken:** ☐ Formal Hearing ☐ Administrative Segregation Assignment ☐ Use of Force ☐ Contraband Disposition ☐ Incident Report  
b. Rule Violation Charged: 102  
c. ☐ **Informal Disposition: Rule Violation:** \_\_\_\_\_ **Sanction:** \_\_\_\_\_ **Effective Date:** \_\_\_\_\_  
d. **Informal Service:** I understand by my signature below that: I waive a hearing by a hearing officer on the offenses charged, this report and informal action will be placed on my OBSCIS & in my facility file records, and where applicable I accept the offer of informal disposition sanction.

Inmate Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

e. **Comments:** Inmate currently on Disciplinary Segregation

f. **Shift Supervisor:** RSuder RSuder 12/1/08  
Print Name and Title Signature Date

2. **Administrative Segregation Assignment Review:** The recommendation has been reviewed and I ☒ **Approve** or ☐ **Disapprove**.

Shift Commander: G. FARRIS, COM G. Farris 12-1-08  
Print Name and Title Signature Date

3. **Formal Hearing Service:** A. **Preparation:** You are entitled to 24 hours from the date and time of receipt of this notice before you may appear before a hearing officer to answer to the offenses charged in this notice. B. **Representation:** You may request representation by staff or a qualified inmate from the general population of this facility if you indicate their name below. A failure to list a name below shall be deemed at your hearing as a waiver of your right to representation. C. **Witnesses:** You may request for your hearing any witness who is relevant, material, & non-cumulative that may include staff and/or the reporting staff if you indicate them by name below. A failure to list by name below shall be deemed at your hearing as a waiver of your right to call witnesses.

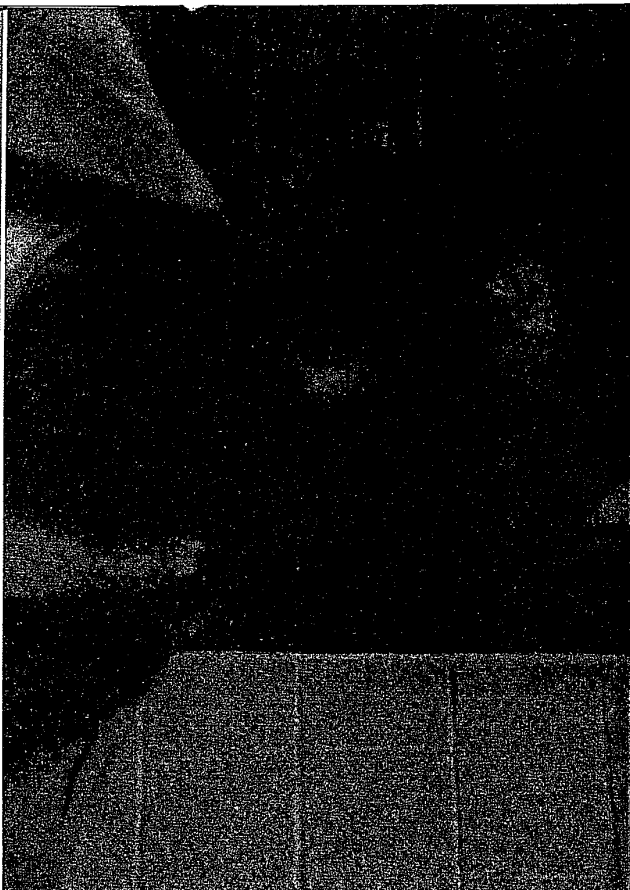

Representative: \_\_\_\_\_ Witness: \_\_\_\_\_

4. **Appeal:** You may appeal a guilty decision and/or sanction in writing to the warden within 15 calendar days of receipt for the hearing officer's decision.  
5. **Service of Notice:** Signature below is only acknowledgment for receipt of notice copy. Refusal to sign is deemed waiver of service obligation by the facility.

**Waiver of 24 Hour Notice:** ☐ I waive 24 hour notice and request to appear before a hearing officer as soon as possible.

Inmate's Signature: Roger Terry DOC#: 341-358 Date: 12-1-08  
☒ **Inmate ID verified** ☐ **Copy given but inmate refused to sign for service** ☐ **Inmate requested no rep. or witness at service**  
Notice Served By: SE Banner, COII SE Banner, COII 12-1-08 2030  
Print Name and Title Signature Date and Time

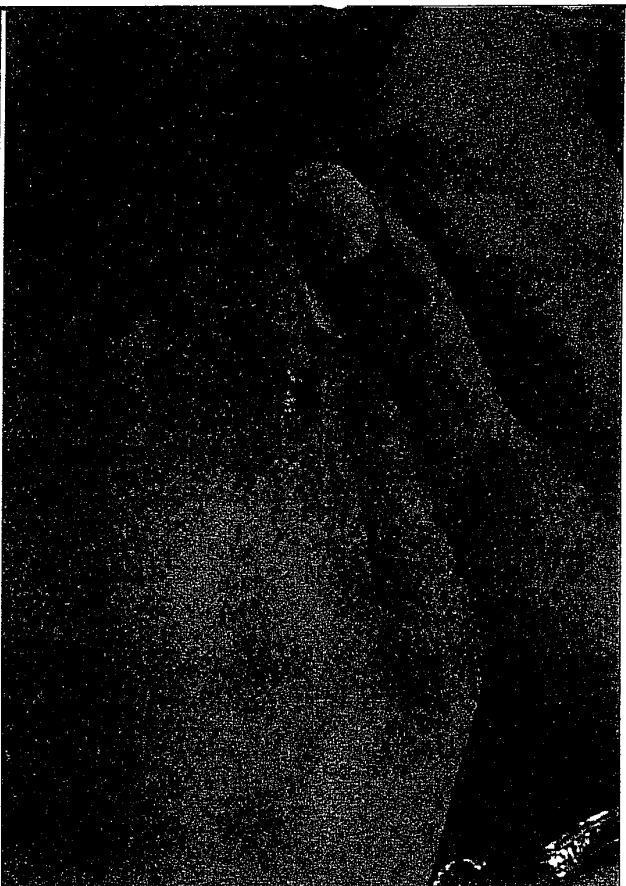
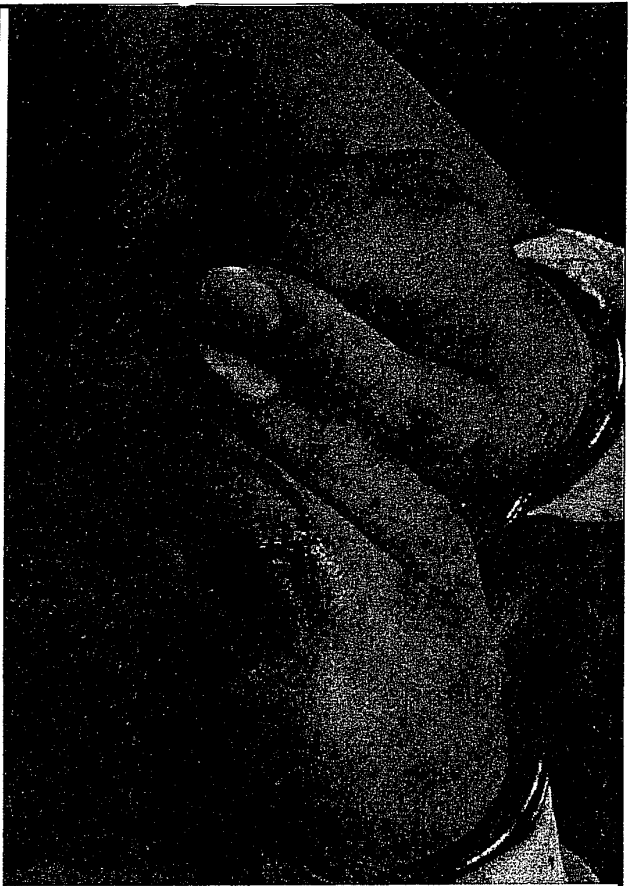
Distribution: White Copy—Base File Yellow Copy—Inmate Pink Copy—Facility  
DC Form 105-4a (Rev. Feb. 07)

	<p><u>Name:</u> LOGAN, JAMES</p> <p><u>DOC#:</u> 347025</p> <p><u>Cell:</u> 4A43A</p> <p><u>Date:</u> 12/1/2008</p> <p><u>Time:</u> 1740 hrs</p> <p><u>Photo by:</u> P. Merling, COS</p> <p><u>Description:</u> Involved in altercation with cell partner Roger Terry #341358. Inmate Logan admitted WMHS-Mem</p> <p>SIR # 08-115 2n</p>
	<p><u>Name:</u> LOGAN, JAMES</p> <p><u>DOC#:</u> 347025</p> <p><u>Cell:</u> 4A43A</p> <p><u>Date:</u> 12/1/2008</p> <p><u>Time:</u> 1740 hrs</p> <p><u>Photo by:</u> P. Merling, COS</p> <p><u>Description:</u> Involved in altercation with cell partner Roger Terry #341358. Inmate Logan admitted WMHS-Mem</p> <p>SIR # 08-115 2n</p>

I, \_\_\_\_\_ have received on the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_ the original photos from \_\_\_\_\_ with incident date of \_\_\_\_\_ from DOC Headquarters Security Operations Unit.

SIGNATURE

DATE



Name: LOGAN, JAMES

DOC#: 347025

Cell: 4A43A

Date: 12/1/2008

Time: 1740 hrs

Photo by: P. Merling, COS

Description:

Involved in altercation with cell partner Roger Terry #341358. Inmate Logan admitted WMHS-Mem

SIR # 08-115 2n

Name: LOGAN, JAMES

DOC#: 347025

Cell: 4A43A

Date: 12/1/2008

Time: 1740 hrs

Photo by: P. Merling, COS

Description:

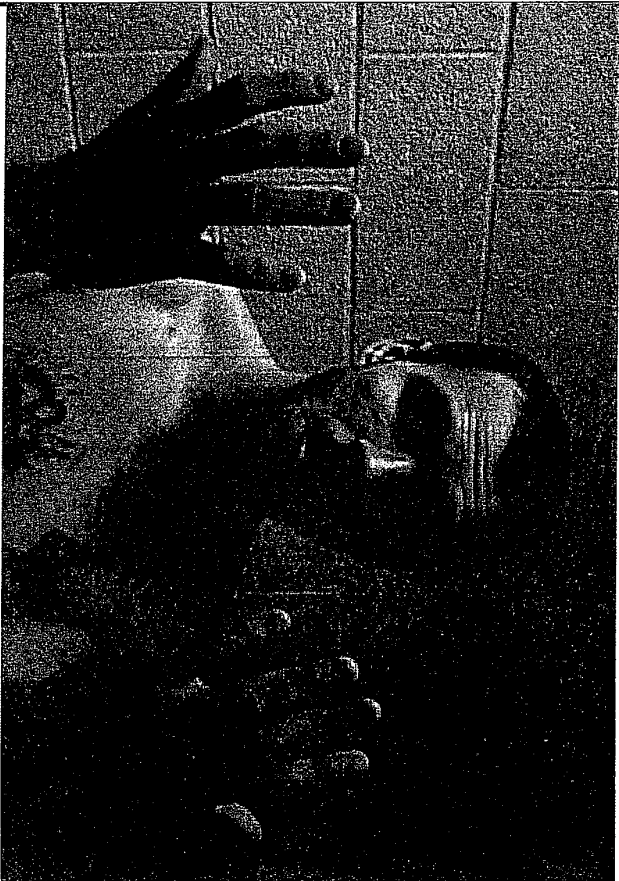
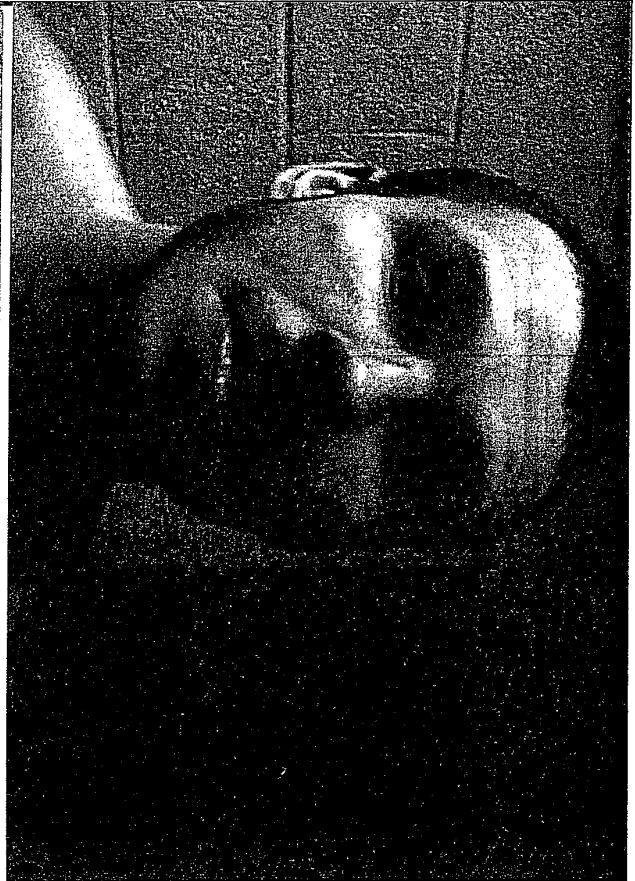
Involved in altercation with cell partner Roger Terry #341358. Inmate Logan admitted WMHS-Mem

SIR # 08-115 2n

I, \_\_\_\_\_ have received on the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_ the original photos from \_\_\_\_\_  
UOF / SIR # \_\_\_\_\_ with incident date of \_\_\_\_\_ from DOC Headquarters Security Operations Unit.

SIGNATURE

DATE



Name: Terry, Roger

DOC#: 341358

Cell: 4A43B

Date: 12/1/2008

Time: 1740 hrs

Photo by: P. Merling, COS

Description:

Involved in altercation with cell partner James Logan #347025. Inmate Logan admitted WMHS-Mem

SIR # 08-115 2n

Name: Terry, Roger

DOC#: 341358

Cell: 4A43B

Date: 12/1/2008

Time: 1740 hrs

Photo by: P. Merling, COS

Description:

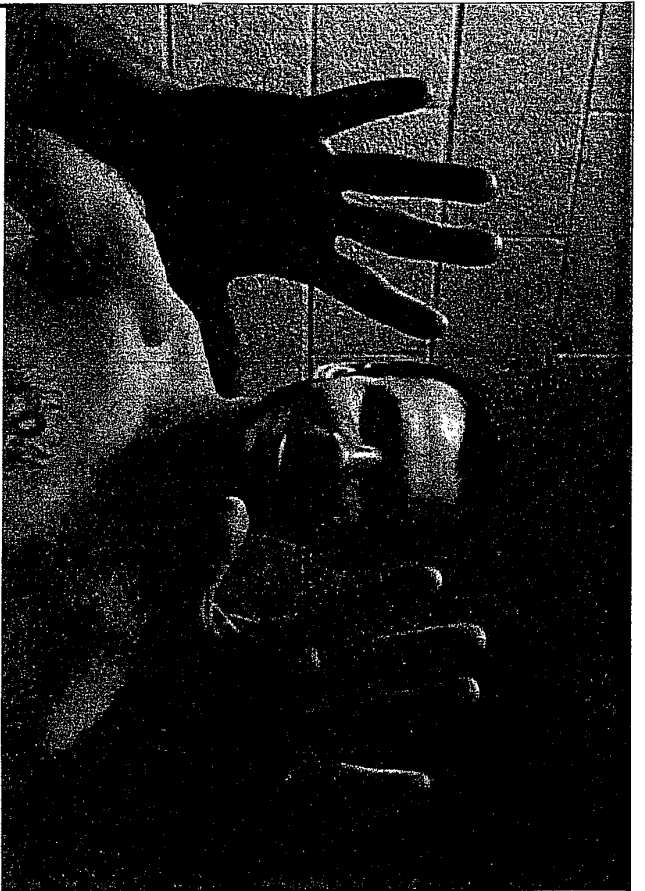
Involved in altercation with cell partner James Logan #347025. Inmate Logan admitted WMHS-Mem

SIR # 08-115 2n

I, \_\_\_\_\_ have received on the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_ the original photos from \_\_\_\_\_ UOF / SIR # \_\_\_\_\_ with incident date of \_\_\_\_\_ from DOC Headquarters Security Operations Unit.

SIGNATURE

DATE



Name: Terry, Roger

DOC#: 341358

Cell: 4A43B

Date: 12/1/2008

Time: 1740 hrs

Photo by: P. Merling, COS

Description:

Involved in altercation with cell partner James Logan #347025. Inmate Logan admitted WMHS-Mem

SIR # 08-115 2n

Name:

DOC#:

Cell:

Date:

Time:

Photo by:

Description:

I, \_\_\_\_\_ have received on the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_ the original photos from UOF / SIR # \_\_\_\_\_ with incident date of \_\_\_\_\_ from DOC Headquarters Security Operations Unit.

SIGNATURE

DATE

Maryland Division of Correction  
INMATE HEARING RECORD

Name: Terry, Roger DOC# 341358 Violation Date: 12/1/08

Hearing Officer of Record: Davis  
Heard With: N/A**I: PRELIMINARY MATTERS:**

Defendant inmate appearance: Date: 12/8/2008 Time: 9:40 AM

The hearing officer of record shall document the following for the record:

1. List any request for inmate representation: ☒ Representation waived by inmate.☐ Yes: Name: waived

NOTE: If request is denied for procedural cause, state below why:

2: List any request by name for a witness: ☒ Witness(es) waived by inmate.a: ☐ Yes: Name: waived

b: List requested witness(es) and state defendant's proffer as to testimony for the witness(es):

c: If inmate witness(es) request is denied for procedural cause, state below why:

3: State any motions, evidence requests, etc. and hearing officer's decision as to such: none presented--Def wished to plead guilty to rule[s] as indicated

4: State any request for postponement and hearing officer's decision as to such:

Name: Terry, Roger DOC# 341358 Violation Date: 12/1/08

**II. EVIDENTIARY MATTERS:**

a. Hearing Date: 12/8/2008

b. Name of Facility Representative: Slate

c. Defendant Inmate Plea:

Rule	Not Guilty	No Plea	Guilty
102	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d. Argument by Parties and Testimony of Witnesses:

Maryland Division of Correction  
INMATE HEARING RECORD

Name: Terry, Roger # 341358 Date of Violation: 12/1/08

Hearing Officer of Record: Davis

Heard With: N/A

## III: HEARING OFFICER DECISION:

Rule	Guilty	Not Guilty	IR	Dismissed	Informal Disposition Sanction
102	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## IV: HEARING OFFICER WRITTEN FINDINGS:

A. State all evidence ( list reports, testimony, physical evidence, etc.)  
weighed and considered at hearing: One pg Notice, three digital photos  
are all made part of the Record

B. Based on evidence above, state fact findings:  
HO finds Def. is knowingly pleading guilty to the rule[s] indicated.

C. Based on fact finding above, state your decision:  
HO accepts negotiated plea agreement. Def understands the ramifications of his  
guilty plea and agrees to waiver his hearing/rights. Def put forward no issues. END AD>

Name: Terry, Roger DOC# 341358 Violation Date: 12/1/08

**V. SANCTIONS:**

Matrix Adjustment History: Poor Effective Date: 12-1-08

Rule	Category	Seg. Days	CR Days	CC/CS	Revoke GCC
102	I	150			---0-

SEG = Segregation CR = Cell Restriction CC = Concurrent CS = Consecutive GCC = Good Conduct Credits

☐ Override- State Reasons:

☐ Other Sanctions:

## VI. RECEIPT OF HEARING RECORD:

Date of Hearing: 12/8/2008

Date of Violation: 12/1/08

Teleconferenced Hearing: N/A

Name and Title of Serving Staff:

\_\_\_\_\_  
DATE

By signing I hereby acknowledge receipt of the hearing officer's decision:

\_\_\_\_\_  
T Roger #\_\_\_\_\_  
DATEDistribution: Institution  
Inmate  
Report Staff

8

## MARYLAND DIVISION OF CORRECTION

## Hearing Decision Review

infraction 12/1/08

Inmate Name Roger Terry 4A43 DOC# 341358 Date of Decision: heard 12/8/08

Rule Violation: Guilty rule 102

I. **Review:** I have reviewed the decision in your case and take the following action:

- ☒ Decision and sanction(s) affirmed.  
☐ Sanction(s) imposed is modified (see Section III).  
☐ Decision referred to Commissioner for review.  
☐ **The decision is remanded for new hearing due to the following reason:**  
☐ By my order for clarification of the record (see Section III).  
☐ By order of the: ☐ Commissioner, ☐ Secretary of DPSCS, or ☐ court (see Sections III and V).

II. **Reviewing Authority Signature:**

Bobby P. Sherrin Warden 12/31/08  
 Print Name & Title Signature Date

III. **Comments:**

IV. **Service Receipt Record:** A failure to sign for receipt shall be deemed a waiver of the Facility's service obligation.

Inmate Signature: Roger Terry Date: 1-6-08

☐ Inmate ID verified at service and inmate refused to sign for service receipt.

Served By: Quetta Title Off Date 1-6-08 Time 4:45 ☐ A.M. ☒ P.M.

V. **Remand Hearing:** Prior to appearance, you are entitled to 24 hours from the date and time of this notice to prepare for your scheduled hearing. You are permitted to request a qualified (per directive procedures) staff or inmate to represent you or as a witness (including reporting staff) for the purposes of your hearing if you list them by name below. Failure to request representation or witnesses below at the time of service shall be deemed a waiver of your right for representation or witnesses at the time of your hearing. You may appeal any guilty finding and/or sanction to the warden within 15 days of the date for receipt of the hearing officer's decision.

Representative: \_\_\_\_\_

Witness: \_\_\_\_\_

Distribution: White - Base File

Yellow - Inmate



## Department of Public Safety and Correctional Services

### Division of Correction Western Correctional Institution

13800 McMULLEN HIGHWAY, SW • CUMBERLAND, MARYLAND 21502  
(301) 729-7000 • FAX (301) 729-7024 • TTY USERS 1-800-735-2258 • www.dpscs.state.md.us

STATE OF MARYLAND

MARTIN O'MALLEY  
GOVERNOR

ANTHONY G. BROWN  
LT. GOVERNOR

GARY D. MAYNARD  
SECRETARY

G. LAWRENCE FRANKLIN  
DEPUTY SECRETARY

DIVISION OF CORRECTION

J. MICHAEL STOFFER  
COMMISSIONER

WESTERN  
CORRECTIONAL  
INSTITUTION

BOBBY SHEARIN  
WARDEN

HARRY B. MURPHY, Ph.D.  
ASSISTANT WARDEN

FRANK B. BISHOP, JR.  
CHIEF OF SECURITY

### ADMINISTRATIVE ACTION

TO: Terry Roger #341358 HU4A43B

Date: 1/15/09

The recommendations of the Reduction in Violence Committee on the Adjustment Infraction of 12/01/08 have been evaluated. It has been determined to impose the following Administrative Action:

**Hearing Date:** 12/08/08

**Original Sentence:** Guilty rule 102 – Cat I – 150 days seg;

**Administrative:**  
**Action:**

The RIV Committee is imposing an administrative action. Your conduct posed a serious threat to the security and orderly running of WCI. Administratively you will be restricted to your assigned room for **60 days consecutive** to ensure that you are in compliance with WCI rules and regulations. Your Unit Manager will discuss with you the specifics of this restriction and any exceptions therein.

  
Bobby Shearin, Warden

BPS/rme

cc: File w/Adjustment Infraction  
Gate House Reception (for visiting sanctions only)  
Segregation Unit Officer  
Case Management (2)  
Commitment  
Traffic Office  
RIV Committee- AW (for additional sanctions only)  
Lt. Creek, HU#5 (for seg reductions only)

JANUARY 22, 2009 RULES 104, 400, 405



## MARYLAND DIVISION OF CORRECTION

## NOTICE OF INMATE RULE VIOLATION AND DISCIPLINARY HEARING

Appendix 1 to DCD-105-4

WCISA

Inmate Name: ROGER TERRY DOC#: 341-358 Facility WCI Housing: 3A-45  
Violation: Date: 1-22-09 Time: 12:45 AM/PM Recommended charge: 104, 400

Reported facts: INMATE ROGER TERRY #341-358 HU #3A-45 CAME TO THE COMMISSARY AT 12:45 PM AMONGST A GROUP OF CELL RESTRICTION END OF DAY SHOPPERS. INMATE TERRY ALSO APPEARED EARLIER CLAIMED HE WAS UNAWARE OF HIS STATUS AND PRESENTED A REGULAR SHOPPING FORM THAT INCLUDED FOOD ITEMS. AFTER ADVISING INMATE TERRY THAT HE WAS ON CELL RESTRICTION HE WAS OFFERED ONLY THE LEGAL AND HYGIENE FROM HIS ORIGINAL LIST, TWO PENS AND ONE SOAP POWDER. INMATE TERRY BECAME IMMEDIATELY ARGUMENTATIVE. I SUMMONED LT. BECKER FROM HIS OFFICE TO BRING THE SITUATION TO A HEALTHY RESOLUTION. INMATE TERRY BECAME MUCH LOUDER, REFUSED A DIRECT ORDER TO LEAVE PEACEFULLY AND SAID TO ME, "YOU WOULD NEVER TREAT ME THIS WAY ON THE STREET." HIS TONE AND FACIAL EXPRESSION SEEMED THREATENING.

I solemnly affirm under the penalties of perjury and upon personal knowledge that the facts set forth in the above report are true.

Reporting Staff: DAVID L. GRAPES, CSO II D. Grapes, CSO II 1/22/09  
Print Name and Title Signature Date

1. **Supervisory Review:** The above report has been reviewed with the following action taken:

- a. **Action Taken:** ☒ Formal Hearing ☒ Administrative Segregation Assignment ☐ Use of Force ☐ Contraband Disposition ☐ Incident Report  
b. Rule Violation Charged: 104, 400 405  
c. ☐ Informal Disposition: Rule Violation: \_\_\_\_\_ Sanction: \_\_\_\_\_ Effective Date: \_\_\_\_\_  
d. **Informal Service:** I understand by my signature below that: I waive a hearing by a hearing officer on the offenses charged, this report and informal action will be placed on my OBSCIS & in my facility file records, and where applicable I accept the offer of informal disposition sanction.

Inmate Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

e. **Comments:** Agreed to Formal Hearing.

f. **Shift Supervisor:** C. McQuinn, COZ C. McQuinn 1-22-09  
Print Name and Title Signature Date

2. **Administrative Segregation Assignment Review:** The recommendation has been reviewed and I ☒ Approve or ☐ Disapprove.

Shift Commander: J. Tichawsky, Capt. J. Tichawsky 1-22-09  
Print Name and Title Signature Date

3. **Formal Hearing Service:** A. Preparation: You are entitled to 24 hours from the date and time of receipt of this notice before you may appear before a hearing officer to answer to the offenses charged in this notice. B. Representation: You may request representation by staff or a qualified inmate from the general population of this facility if you indicate their name below. A failure to list a name below shall be deemed at your hearing as a waiver of your right to representation. C. Witnesses: You may request for your hearing any witness who is relevant, material, & non-cumulative that may include staff and/or the reporting staff if you indicate them by name below. A failure to list by name below shall be deemed at your hearing as a waiver of your right to call witnesses.

Representative: \_\_\_\_\_ Witness: \_\_\_\_\_

4. **Appeal:** You may appeal a guilty decision and/or sanction in writing to the warden within 15 calendar days of receipt for the hearing officer's decision.  
5. **Service of Notice:** Signature below is only acknowledgment for receipt of notice copy. Refusal to sign is deemed waiver of service obligation by the facility.

**Waiver of 24 Hour Notice:** ☒ I waive 24 hour notice and request to appear before a hearing officer as soon as possible.

Inmate's Signature: Roger Terry DOC #: 341-358 Date: 1-22-09  
☒ Inmate ID verified ☐ Copy given but inmate refused to sign for service ☒ Inmate requested no rep. or witness at service

Notice Served By: J. Tichawsky, Capt. J. Tichawsky 1-22-09 1500 hrs  
Print Name and Title Signature Date and Time

Distribution: White Copy—Base File  
DC Form 105-4a (Rev. Feb. 07)

Yellow Copy—Inmate

Pink Copy—Facility

# WESTERN CORRECTIONAL INSTITUTION CUMBERLAND, MARYLAND

## INFORMATION REPORT FORM

DATE: 1-22-09  
APPROXIMATE TIME: 12:40 PM

DISTRIBUTION: SHIFT COMMANDER

INCIDENT REFERENCE HEADING: Threatened an officer  
INMATE'S NAME, NUMBER, HOUSING: Roger Terry, 341-358 H-3A-45  
INCIDENT DESCRIPTION (WHO, WHAT, WHERE, WHEN, HOW): While working

Commissary Inmate Roger Terry #341-358 was shopping  
at Window Two where officer Grapes was working.  
Inmate Terry was getting loud and excited because  
he tried to shop regular commissary when he was on  
cell restriction. He asked for a LT. and officer Grapes  
called for LT. Becker after hearing both sides LT. Becker  
told Terry he could only shop for cell restriction items.  
Inmate Terry started to leave commissary and on  
his way out the door he said 'if we were on the  
street you wouldn't be doing this' Inmate Terry  
went back to H-3.

DISPOSITION OF INCIDENT: Attach copy to ADMINISTRATIVE  
George M. Beachell  
REPORTING OFFICER

### DISTRIBUTION:

ASSISTANT WARDEN \_\_\_\_\_  
SECURITY CHIEF \_\_\_\_\_  
UNIT MANAGER / \_\_\_\_\_  
CASE MANAGER \_\_\_\_\_

PSYCHOLOGY DEPT. \_\_\_\_\_  
MEDICAL DEPT. \_\_\_\_\_  
REPORTING OFFICER / \_\_\_\_\_  
HEARING OFFICER \_\_\_\_\_  
MAINTENANCE \_\_\_\_\_

INMATE'S COPY \_\_\_\_\_  
8-4 SHIFT \_\_\_\_\_  
4-12 SHIFT \_\_\_\_\_  
12-8 SHIFT \_\_\_\_\_  
OTHER \_\_\_\_\_

C. M. J. J. J.  
SUPERVISOR NAME AND TITLE

WESTERN CORRECTIONAL INSTITUTION  
Cumberland, Maryland

INFORMATION REPORT FORM

DATE: 1/22/2009  
APPROXIMATE TIME: 12:40

DISTRIBUTION: SHIFT COMMANDER

INCIDENT REFERENCE HEADING: Threatened an officer  
INMATE'S NAME, NUMBER, HOUSING: Roger Terry, 341-358, HU3A45

Inmate Roger Terry, who is on cell restriction, came to the commissary to get his legal and hygiene items. Upon arriving, inmate Terry wanted to switch his slips, which is not allowed in the commissary. Officer Grapes informed inmate Terry numerous times that he would not be switching slips.

After a few minutes, I told inmate Terry that he would use his first list. Upon walking away, I heard inmate Terry say to Officer Grapes, "If we were on the street, you wouldn't treat me like this". He then left the commissary. I asked Officer Grapes and Officer Everett, if I had heard it right and both had said yes.

Lt. B. Becker, CSOS  
REPORTING OFFICER

DISPOSITION OF INCIDENT:

ATTACH COPY TO ADMINISTRATIVE

DISTRIBUTION:

ASSISTANT WARDEN  
SECURITY CHIEF  
UNIT MANAGER  
CASE MANAGER

☐  
☒  
☐

PSYCHOLOGY DEPT.  
MEDICAL DEPT.  
REPORTING OFFICER  
HEARING OFFICER  
MAINTENANCE

☐  
☒  
☐

INMATES COPY  
8-4 SHIFT  
4-12 SHIFT  
12-8 SHIFT  
OTHER

☐  
☐  
☐  
☐

CMY Lousie COZ  
SUPERVISOR NAME AND TITLE

**Maryland Division of Correction  
INMATE HEARING RECORD**

Name: Terry Rogers DOC# 341358 Violation Date: 1/22/2009

Hearing Officer of Record: Frederick J. Nastri  
Heard With:

**I: PRELIMINARY MATTERS:**

Defendant inmate appearance: Date: 2/2/2009 Time: 9:45 AM

The hearing officer of record shall document the following for the record:

1. List any request for inmate representation: ☒ Right to representation  
waived by inmate.  
☐ Yes: Name:

**NOTE: If request is denied for procedural cause, state below why:**

2. List any request by name for a witness: ☒ Right to witness(es) waived by  
inmate.

a: ☐ Yes: Name:

b: List requested witness(es) and state defendant's proffer as to  
testimony for the witness(es):

c: If inmate witness(es) request is denied for procedural cause, state  
below why:

3: State any motions, evidence requests, etc. and hearing officer's decision  
as to such:

Plea agreement reached in preliminary.

4: State any request for postponement and hearing officer's decision as to  
such:

**II. EVIDENTIARY MATTERS:**

a. Hearing Date: 2/2/2009

b. Name of Facility Representative: Slate

c. Defendant Inmate Plea:

Rule	Not Guilty	No Plea	Guilty
400,405	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d. Argument by Parties and Testimony of Witnesses:  
Plea of guilt accepted to the cited rules.

**Maryland Division of Correction  
INMATE HEARING RECORD**

Name: Terry Rogers # 341358 Date of Violation: 1/22/2009

Hearing Officer of Record: Frederick J. Nastri

Heard With:

**III: HEARING OFFICER DECISION:**

Rule	Guilty	Not Guilty	IR	Dismissed	Informal Disposition Sanction
400,405	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**IV: HEARING OFFICER WRITTEN FINDINGS:**

**A. State all evidence ( list reports, testimony, physical evidence, etc.) weighed and considered at hearing:** Violation report and plea of guilt to cited rules.

**B. Based on evidence above, state fact findings:**  
I accept plea was entered freely and voluntarily and the evidence validated the rule(s) plead to.

**C. Based on fact finding above, state your conclusions:**  
Plea validated by evidence.

**V. SANCTIONS:****Matrix Adjustment History: Poor Effective Date: 1-22-09**

Rule	Category	Seg. Days	CR Days	CC/CS	Revoke GCC
400		60			20
405		60		CC	

SEG = Segregation CR = Cell Restriction CC = Concurrent CS = Consecutive GCC = Good Conduct Credits

☐ Override- State Reasons:

☐ Other Sanctions:

## VI. RECEIPT OF HEARING RECORD:

Date of Hearing: 2/2/2009

Date of Violation: 1/22/2009

Teleconferenced Hearing: N/A

Name and Title of Serving Staff:

---

DATE

By signing I hereby acknowledge receipt of the hearing officer's decision:

---

Terry Rogers #341358

DATE

Distribution: Institution  
Inmate  
Report Staff

## MARYLAND DIVISION OF CORRECTION

## Hearing Decision Review

infraction 1/22/09

Inmate Name Roger Terry 4C15 DOC# 341358 Date of Decision: heard 2/2/09Rule Violation: Guilty rules 400 & 405I. **Review:** I have reviewed the decision in your case and take the following action:

- ☒ Decision and sanction(s) affirmed.  
☐ Sanction(s) imposed is modified (see Section III).  
☐ Decision referred to Commissioner for review.  
☐ **The decision is remanded for new hearing due to the following reason:**  
☐ By my order for clarification of the record (see Section III).  
☐ By order of the: ☐ Commissioner, ☐ Secretary of DPSCS, or ☐ court (see Sections III and V).

II. **Reviewing Authority Signature:**

Bobby P. Sherrin Warden 2/24/09  
 Print Name & Title Signature Date

III. **Comments:**IV. **Service Receipt Record:** A failure to sign for receipt shall be deemed a waiver of the Facility's service obligation.Inmate Signature: Roger Terry Date: 3-6-09☐ Inmate ID verified at service and inmate refused to sign for service receipt.Served By: [Signature] Title COB Date 3-6-09 Time 1448 ☐ A.M. ☒ P.M.

V. **Remand Hearing:** Prior to appearance, you are entitled to 24 hours from the date and time of this notice to prepare for your scheduled hearing. You are permitted to request a qualified (per directive procedures) staff or inmate to represent you or as a witness (including reporting staff) for the purposes of your hearing if you list them by name below. Failure to request representation or witnesses below at the time of service shall be deemed a waiver of your right for representation or witnesses at the time of your hearing. You may appeal any guilty finding and/or sanction to the warden within 15 days of the date for receipt of the hearing officer's decision.

Representative: \_\_\_\_\_

Witness: \_\_\_\_\_

Distribution: White - Base File

Yellow - Inmate

AUGUST 15, 2009 RULES 301, 305, 405



## MARYLAND DIVISION OF CORRECTION

Appendix 1 to DCD 105-4

## NOTICE OF INMATE RULE VIOLATION AND DISCIPLINARY HEARING

Inmate Name: ROGER, Terry DOC#: 341-358 Facility WCI Housing: 5A48B  
 Violation: Date: 8-15-09 Time: 01:40 AM/PM Recommended charge: 301, 305, 405

Reported facts: ON August 15<sup>th</sup> 2009 AT Approximately 0140 am I ofc J. Worzel Co II  
was observing inmates returning from Urinalysis Passes. I noticed inmate  
Roger, Terry # 341-358 HUSA48B walk into the unit very slowly. I told  
Inmate Roger to place his hands on the wall and began a Pat Search, he  
had an intense odor of alcohol, myself and ofc R Kirk Co II escorted  
Inmate Roger to his cell and conducted a cell search. Upon completion  
of the cell search two quart size drink mix cups were filled with  
fermented fruit juices. They were hidden behind his locker. Inmate Roger  
was notified he was receiving an adjustment for being in violation of  
Rule 301 which clearly states: Unauthorized possession or use of Alcohol.  
Inmate Roger was positively identified by his state issued ID card  
and was returned to him.

I solemnly affirm under the penalties of perjury and upon personal knowledge that the facts set forth in the above report are true.

Reporting Staff:

J. Worzel Co II  
 Print Name and Title

Signature

Date

8-15-09

1. **Supervisory Review:** The above report has been reviewed with the following action taken:

- a. **Action Taken:** ☒ Formal Hearing ☒ Administrative Segregation Assignment ☐ Use of Force ☐ Contraband Disposition ☐ Incident Report
- b. Rule Violation Charged: 301, 302, 305, 405
- c. ☐ Informal Disposition: Rule Violation: \_\_\_\_\_ Sanction: \_\_\_\_\_ Effective Date: \_\_\_\_\_
- d. **Informal Service:** I understand by my signature below that: I waive a hearing by a hearing officer on the offenses charged, this report and informal action will be placed on my OBSCIS & in my facility file records, and where applicable I accept the offer of informal disposition sanction.

Inmate Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

- e. **Comments:** Placed on ASPA, waiting for test results of  
Alco sensor. Note \* Inmate was housed in cell by himself
- f. **Shift Supervisor:** D CREEK COL L Kirk Co II 8-15-09  
 Print Name and Title Signature Date

2. **Administrative Segregation Assignment Review:** The recommendation has been reviewed and I ☒ Approve or ☐ Disapprove.

Shift Commander: D.L. White coc  
 Print Name and Title

Signature

Date

8-15-09

3. **Formal Hearing Service:** A. Preparation: You are entitled to 24 hours from the date and time of receipt of this notice before you may appear before a hearing officer to answer to the offenses charged in this notice. B. Representation: You may request representation by staff or a qualified inmate from the general population of this facility if you indicate their name below. A failure to list a name below shall be deemed at your hearing as a waiver of your right to representation. C. Witnesses: You may request for your hearing any witness who is relevant, material, & non-cumulative that may include staff and/or the reporting staff if you indicate them by name below. A failure to list by name below shall be deemed at your hearing as a waiver of your right to call witnesses.

Representative: NONEWitness: NONE

4. **Appeal:** You may appeal a guilty decision and/or sanction in writing to the warden within 15 calendar days of receipt for the hearing officer's decision.
5. **Service of Notice:** Signature below is only acknowledgment for receipt of notice copy. Refusal to sign is deemed waiver of service obligation by the facility.

**Waiver of 24 Hour Notice:** ☐ I waive 24 hour notice and request to appear before a hearing officer as soon as possible.

Inmate's Signature: Roger TerryDOC#: 341-358Date: 8/15/09

☒ Inmate ID verified ☒ Copy given but inmate refused to sign for service ☐ Inmate requested no rep. or witness at service

Notice Served By: R W Resseger Co II  
 Print Name and Title

Signature

Date and Time

R W Resseger Co II

8/15/09 0711 AM

Distribution:

White Copy—Base File

Yellow Copy—Inmate

Pink Copy—Facility

DC Form 105-4a (Rev. Feb. 07)

EXHIBIT 8

000053



## MARYLAND DIVISION OF CORRECTION

Appendix 1 to DCD 105-4

## NOTICE OF INMATE RULE VIOLATION AND DISCIPLINARY HEARING

Terry, Roger

341358

WCI

5A48B

Inmate Name: 08/15/09 0100 DOC#: 405 Facility: Housing:

Violation: Date: Time: AM/PM. Recommended charge: 405

On 08/15/09, I Ofc. M. McLaughlin CO II, was assigned as relief officer performing inmate urinalysis detail. Inmate Roger Terry, 341358, 5A48B, during instructions for urinalysis testing, was observed to be very belligerent and making multiple disrespectful comments to this reporting officer. I notified Inmate Terry he had three hours to submit a urine sample, responding "I'll give you my fucking urine sample when I want to." It is also noted that Inmate Terry smelled of a peculiar sweet odor. Upon submitting a urine sample, Inmate Terry returned to his housing unit at which time a cell search discovered suspected fermented juices.

I solemnly affirm under the penalties of perjury and upon personal knowledge that the facts set forth in the above report are true.

M. McLaughlin CO II

08/15/09

Reporting Staff: MICHAEL MCLAUGHLIN CO II [Signature] Date

1. **Supervisory Review:** The above report has been reviewed with the following action taken:

- a. **Action Taken:** ☒ Formal Hearing ☐ Administrative Segregation Assignment ☐ Use of Force ☐ Contraband Disposition ☐ Incident Report
- b. Rule Violation Charged: 405
- c. ☐ **Informal Disposition:** Rule Violation: Sanction: Effective Date:
- d. **Informal Service:** I understand by my signature below that: I waive a hearing by a hearing officer on the offenses charged, this report and informal action will be placed on my OBSCIS & in my facility file records, and where applicable I accept the offer of informal disposition sanction.

Inmate Signature: Date: Time:

e. **Comments:** Disrespectful staff merits formal hearing

f. **Shift Supervisor:** D. CREEK CO II [Signature] Date 8-15-09

2. **Administrative Segregation Assignment Review:** The recommendation has been reviewed and I ☐ Approve or ☐ Disapprove.

Shift Commander: Print Name and Title Signature Date

3. **Formal Hearing Service:** A. Preparation: You are entitled to 24 hours from the date and time of receipt of this notice before you may appear before a hearing officer to answer to the offenses charged in this notice. B. Representation: You may request representation by staff or a qualified inmate from the general population of this facility if you indicate their name below. A failure to list a name below shall be deemed at your hearing as a waiver of your right to representation. C. Witnesses: You may request for your hearing any witness who is relevant, material, & non-cumulative that may include staff and/or the reporting staff if you indicate them by name below. A failure to list by name below shall be deemed at your hearing as a waiver of your right to call witnesses.

Representative: Witness:

4. **Appeal:** You may appeal a guilty decision and/or sanction in writing to the warden within 15 calendar days of receipt for the hearing officer's decision.
5. **Service of Notice:** Signature below is only acknowledgment for receipt of notice copy. Refusal to sign is deemed waiver of service obligation by the facility.

**Waiver of 24 Hour Notice:** ☐ I waive 24 hour notice and request to appear before a hearing officer as soon as possible.

Inmate's Signature: Roger Terry DOC #: 341-358 Date: 8/15/09

☒ Inmate ID verified ☒ Copy given but inmate refused to sign for service ☐ Inmate requested no rep. or witness at service

Notice Served By: R. Hughes CO II [Signature] Date and Time 8-15-09 0900 AM

Distribution: White Copy—Base File Yellow Copy—Inmate Pink Copy—Facility

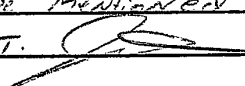
DC Form 105-4a (Rev. Feb. 07)

EXHIBIT 8

000054

Maryland Division of Correction  
**NOTICE OF INMATE RULE VIOLATION AND DISCIPLINARY HEARING**  
 (Continuation Sheet)

Inmate Name: Roger Terry # 341-358 Date of Violation: 8-15-2009

In addition to the incident on Page (1) T of the World and etc  
 Kik went to pack up inmate Roger's personal items since he was  
 being placed on administrative Segregation Pending Adjustment additional  
 quantities of fermented juices was found in a five gallon bucket.  
 Along with the five gallon bucket was a broken 8 inch fan, several  
 expired prescription medications, a Maxwell House coffee bucket, a small eye  
 drop bottle containing black ink and a red ink pen. When inmate Roger  
 was informed that said articles above were being confiscated he became  
 very disrespectful and claiming that "we planted the jump in his cell". As  
 he was being escorted to his new cell he was demanding his property.  
 A notice of confiscation was written for the above mentioned items  
 and turned in along with this adjustment report. 

Inmate's Signature Roger Terry # 341-358 Date 8/15/09  
 Notice Served By RW Resseger Title COIT Date 8/15/09 Time 0711 AM  
RW Resseger

Distribution: White copy - Base File Yellow copy - Inmate Pink copy - Institution -

DC Form 105-5a (Rev. Nov. 1997)

**WESTERN CORRECTIONAL INSTITUTION**  
Cumberland, Maryland

**INFORMATION REPORT FORM**

Date: 8/15/2009  
APPROXIMATE TIME 0930am

INCIDENT REFERENCE HEADING: Testing of Suspected Alcohol  
INMATE'S NAME, NUMBER, HOUSING TERRY, ROGER #341358 5A48B  
INCIDENT DESCRIPTION (WHO, WHAT, WHERE, WHEN, HOW)? On 8/15/09 I officer

K Keller CO II conducted a test of suspected alcohol that was confiscated from cell 5A48B by officer WORGUL COII. I used the Alco-Sensor IV which I am certified to use for testing. The first test was conducted at 0930 hrs with a positive reading of .216. The confirmation test was conducted at 1030 hrs with a positive reading of .202. Both test results were well above the calibrated cut off of .036. The alcohol was then properly disposed of. This report submitted for your information. The Alco-Sensor printer is not working for print outs.

K Keller COII

REPORTING OFFICER

DISPOSITION OF INCIDENT: \_\_\_\_\_

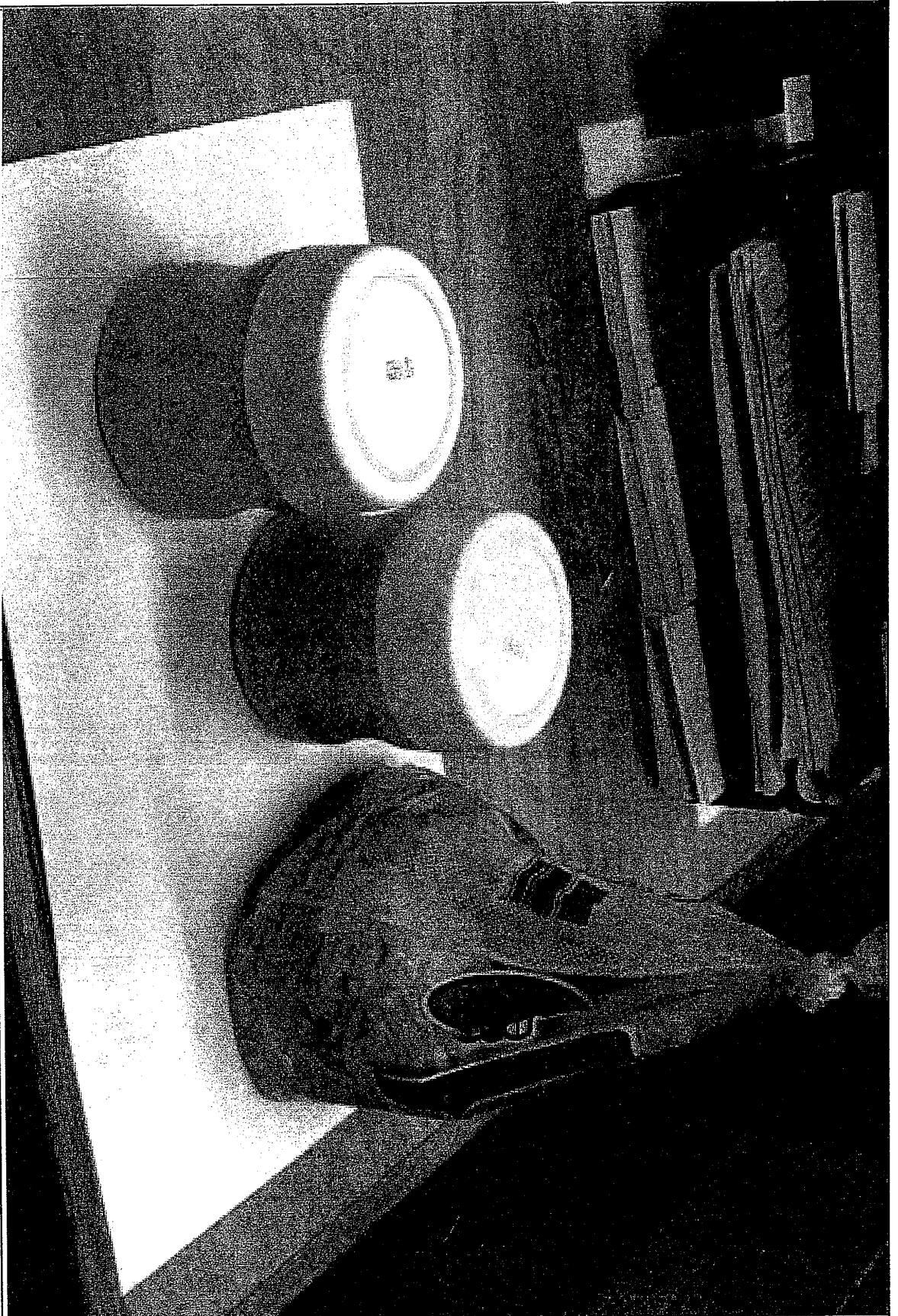
**DISTRIBUTION:**

ASSISTANT WARDEN \_\_\_\_\_  
SECURITY CHIEF \_\_\_\_\_  
UNIT MANAGER \_\_\_\_\_  
CASE MANAGER \_\_\_\_\_

PSYCHOLOGY DEPT. \_\_\_\_\_  
MEDICAL DEPT \_\_\_\_\_  
REPORTING OFFICER \_\_\_\_\_  
HEARING OFFICER \_\_\_\_\_  
MAINTENANCE \_\_\_\_\_

INMATE'S COPY \_\_\_\_\_  
8-4 SHIFT \_\_\_\_\_  
4-12 SHIFT \_\_\_\_\_  
12-8 SHIFT \_\_\_\_\_  
OTHER \_\_\_\_\_

P. N. [Signature]  
SUPERVISOR NAME AND TITLE



Name:

Terry, Roger

DOC:

341358

Cell: 5A48B

DATE

Aug 15 2009

Photo taken by:

D B Lancaster COII

Time photo was taken:

Approx 0300 Hours

Location of incident:

Suspected Fermented Juices Discovered in 5A48.

**Maryland Division of Correction  
INMATE HEARING RECORD**

Name: Roger Terry DOC# 341358 Violation Date: 8/15/09

Hearing Officer of Record: Ana Maddox  
Heard With: N/A

**I: PRELIMINARY MATTERS:**

Defendant inmate appearance: Date: 8/17/2009 Time: 12:51 PM

The hearing officer of record shall document the following for the record:

1. List any request for inmate representation: ☒ Representation waived by inmate.

☐ Yes: Name: N/A

NOTE: If request is denied for procedural cause, state below why:  
N/A

2. List any request by name for a witness: ☒ Witness(es) waived by inmate.

a: ☐ Yes: Name: N/A

b: List requested witness(es) and state defendant's proffer as to testimony for the witness(es): N/A

c: If inmate witness(es) request is denied for procedural cause, state below why: N/A

3: State any motions, evidence requests, etc. and hearing officer's decision as to such: N/A

4: State any request for postponement and hearing officer's decision as to such: N/A

Name: Roger Terry DOC# 341358 Violation Date: 8/15/09

**II. EVIDENTIARY MATTERS:**

a. Hearing Date: 8/17/2009

b. Name of Facility Representative: Sgt. Slate

c. Defendant Inmate Plea:

Rule	Not Guilty	No Plea	Guilty
301	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
302	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
305	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
405	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d. Argument by Parties and Testimony of Witnesses:

NOTICE OF INMATE RULE VIOLATION CO J. Worgul  
photo printout of containers with juice  
Information Report CO K. Keller

INMATE STATEMENTS ---pled guilty to 301 and 302

**Maryland Division of Correction  
INMATE HEARING RECORD**

Name: Roger Terry # 341358 Date of Violation: 8/15/09

Hearing Officer of Record: Ana Maddox  
Heard With: N/A

**III: HEARING OFFICER DECISION:**

Rule	Guilty	Not Guilty	IR	Dismissed	Informal Disposition Sanction
301	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
302	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
305	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
405	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**IV: HEARING OFFICER WRITTEN FINDINGS:**

**A. State all evidence ( list reports, testimony, physical evidence, etc.) weighed and considered at hearing:** Notice of Inmate Rule Violation, photo printouts, information report, statements of inmate at hearing

**B. Based on evidence above, state fact findings:**  
Roger Terry pled guilty to rules 301 and 302.

**C. Based on fact finding above, state your decision:**  
Hearing Officer considered Notice of Inmate Rule Violation by CO J. Worgul, photo printout, information report, as well as statements of Roger Terry. Terry pled guilty to rules 301 and 302. Hearing Officer accepts guilty plea. Hearing Officer finds rules 305 and 405 do not apply and Terry is not guilty of rules 305 and 405.

Name: Roger Terry DOC# 341358 Violation Date: 8/15/09

**V. SANCTIONS:**

**Matrix Adjustment History: poor Effective Date: 8-15-09**

Rule	Category	Seg. Days	CR Days	CC/CS	Revoke GCC
301	3	90	0	cc	0
302	3	90	0	cc	0

SEG = Segregation CR = Cell Restriction CC = Concurrent CS = Consecutive GCC = Good Conduct Credits

☐ Override- State Reasons: none

☐ Other Sanctions: none

Name: Roger Terry DOC# 341358 Violation Date: 8/15/09

**V. SANCTIONS:**

Matrix Adjustment History: fair Effective Date: 8-15-09

Rule	Category	Seg. Days	CR Days	CC/CS	Revoke GCC
405	4	30	0	0	0

SEG = Segregation CR = Cell Restriction CC = Concurrent CS = Consecutive GCC = Good Conduct Credits

☐ Override- State Reasons: none

☐ Other Sanctions: none

## VI. RECEIPT OF HEARING RECORD:

Date of Hearing: 8/17/2009

Date of Violation: 8/15/09

Teleconferenced Hearing: N/A

Name and Title of Serving Staff:

*B. Butler**8-18-09*

DATE

By signing I hereby acknowledge receipt of the hearing officer's decision:

*Roger Terry 341-358*

Roger Terry #341358

*8/18/09*

DATE

Distribution: Institution  
Inmate  
Report Staff

## MARYLAND DIVISION OF CORRECTION

## Hearing Decision Review

Inmate Name Roger Terry 5B10 4AM DOC# 341358 Date of Decision: heard 8/17/09 infraction 8/15/09

Rule Violation: Guilty rules 301 & 302

I. **Review:** I have reviewed the decision in your case and take the following action:

- ☒ Decision and sanction(s) affirmed.  
☐ Sanction(s) imposed is modified (see Section III).  
☐ Decision referred to Commissioner for review.  
☐ **The decision is remanded for new hearing due to the following reason:**  
☐ By my order for clarification of the record (see Section III).  
☐ By order of the: ☐ Commissioner, ☐ Secretary of DPSCS, or ☐ court (see Sections III and V).

II. **Reviewing Authority Signature:**

[Signature] Warden [Signature] 9/14/09  
 Print Name & Title Signature Date

III. **Comments:**

IV. **Service Receipt Record:** A failure to sign for receipt shall be deemed a waiver of the Facility's service obligation.

Inmate Signature: Roger Terry Date: 9/17/09  
☐ Inmate ID verified at service and inmate refused to sign for service receipt.

Served By: [Signature] Title Warden Date 9-17-09 Time 1335 ☐ A.M. ☒ P.M.

V. **Remand Hearing:** Prior to appearance, you are entitled to 24 hours from the date and time of this notice to prepare for your scheduled hearing. You are permitted to request a qualified (per directive procedures) staff or inmate to represent you or as a witness (including reporting staff) for the purposes of your hearing if you list them by name below. Failure to request representation or witnesses below at the time of service shall be deemed a waiver of your right for representation or witnesses at the time of your hearing. You may appeal any guilty finding and/or sanction to the warden within 15 days of the date for receipt of the hearing officer's decision.

Representative: \_\_\_\_\_

Witness: \_\_\_\_\_

Distribution: White - Base File

Yellow - Inmate

AUGUST 25, 2009 RULE 301



S H

MARYLAND DIVISION OF CORRECTION  
NOTICE OF INMATE RULE VIOLATION AND DISCIPLINARY HEARING

Inmate Name: Roger Terry DOC#: 341358 Facility: WCI Housing: 4A11A  
 Violation: Date: 8-25-09 Time: 0855 AM/PM: AM Recommended charge: 301

Under the provisions of DCD 110-15 and WCI ID 110-11-1, the subject was SPOTCHECK selected from the general population for urine sampling on 8/15/09 at 0120. The collecting Officer MANNING, using the inmate's ID card for positive identification, observed the subject giving the sample. Collecting Officer identified the sample with the subject's name, number, and date of collection. The sample was then placed in the Urine Testing Station at WCI. The primary test was done on 8/18/09 at 1027 and was conducted by R. Barnes, CO-II using the EMIT II Plus ETOH Assay. The assay tested positive for ETOH. The confirming test was done on 8/25/09 at 0855 and was conducted by Keller COII using the EMIT II Plus ETOH Assay. The assay tested positive for ETOH. Both positive assays were conducted by personnel who are qualified to administer the above chemical test within the requirements of the American Correctional Association, and the Division of Correction, State of Maryland.

I solemnly affirm under the penalties of perjury and upon personal knowledge that the facts set forth in the above report are true.

Reporting Staff: KELLER COII [Signature] 8/25/09  
 Print Name and Title Signature Date

1. **Supervisory Review:** The above report has been reviewed with the following action taken:

- a. **Action Taken:** ☒ Formal Hearing ☒ Administrative Segregation Assignment ☐ Use of Force ☐ Contraband Disposition ☐ Incident Report  
 b. Rule Violation Charged: CAT III #301  
 c. ☐ Informal Disposition: Rule Violation: \_\_\_\_\_ Sanction: \_\_\_\_\_ Effective Date: \_\_\_\_\_  
 d. **Informal Service:** I understand by my signature below that: I waive a hearing by a hearing officer on the offenses charged, this report and informal action will be placed on my OBSCIS & in my facility file records, and where applicable I accept the offer of informal disposition sanction.

Inmate Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

e. **Comments:** REFER TO FORMAL HEARING

f. **Shift Supervisor:** P. NATALE CO [Signature] 8-25-09  
 Print Name and Title Signature Date

2. **Administrative Segregation Assignment Review:** The recommendation has been reviewed and I ☒ Approve or ☐ Disapprove.

Shift Commander: B. E. Mangus CO [Signature] 8/25/09  
 Print Name and Title Signature Date

3. **Formal Hearing Service:** A. Preparation: You are entitled to 24 hours from the date and time of receipt of this notice before you may appear before a hearing officer to answer to the offenses charged in this notice. B. Representation: You may request representation by staff or a qualified inmate from the general population of this facility if you indicate their name below. A failure to list a name below shall be deemed at your hearing as a waiver of your right to representation. C. Witnesses: You may request for your hearing any witness who is relevant, material, & non-cumulative that may include staff and/or the reporting staff if you indicate them by name below. A failure to list by name below shall be deemed at your hearing as a waiver of your right to call witnesses.

Representative: \_\_\_\_\_ Witness: \_\_\_\_\_

4. **Appeal:** You may appeal a guilty decision and/or sanction in writing to the warden within 15 calendar days of receipt for the hearing officer's decision.  
 5. **Service of Notice:** Signature below is only acknowledgment for receipt of notice copy. Refusal to sign is deemed waiver of service obligation by the facility.

**Waiver of 24 Hour Notice:** ☐ I waive 24 hour notice and request to appear before a hearing officer as soon as possible.

Inmate's Signature: Roger Terry DOC#: 341-358 Date: 8/25/09

☒ Inmate ID verified ☐ Copy given but inmate refused to sign for service ☐ Inmate requested no rep. or witness at service

Notice Served By: S. Shockey COII [Signature] 8-25-09 1003  
 Print Name and Title Signature Date and Time

Distribution:

White Copy—Base File

Yellow Copy—Inmate

Pink Copy—Facility

DC Form 105-4a (Rev. Feb. 07)

EXHIBIT 8

000066

**REQUEST FOR URINALYSIS TEST**INMATE ROGER TERRY NUMBER: 341358  
Print NameINSTITUTION: WCI HU5-A-048-BRequest made by Sgt Raley Date 8/14/2009  
Print NameCircumstances Leading to Request Spot/Suspicious behaviorRequest That Specimen be Tested for ALL CDSRequest Approved by D. CREEK COL Date 8-15-09  
D. CREEK COL  
Sign NameI, R. Manning hereby certify that the following is true and correct:  
Print NameThe above named inmate, whose identity was verified by (check one) ☒ I.D. Card ☐ Escort Card,  
was told that he/she is being ordered to submit a urine specimen on the following basis:  
(check one) ☒ Spot check; ☐ Routine; ☐ Random.The above-named inmate was asked if he/she had taken any medication in the past 30 days and he/she replied  
(check one) ☒ that he/she has not ☐ that he/she has. If he/she has, complete DC Form 110-15-  
eR, Appendix 5The above-named inmate (check one) ☐ refused to submit a urine specimen: ☒ submitted a urine  
specimen in my presence in a specimen container labeled with the name of the institution/facility, name and commitment  
number of the inmate, date of collection, the name of the collecting officer and thereafter the inmate handed the  
specimen container to me. I thereafter sealed the specimen container with evidence tape, and maintained exclusive  
possession and control of the bottle until I transferred it from my possession and control as indicated below:8/15/09  
DateR. Manning  
SIGNATURER.T. 341358  
INMATES INITIALS**CHAIN-OF-CUSTODY OF SPECIMEN**

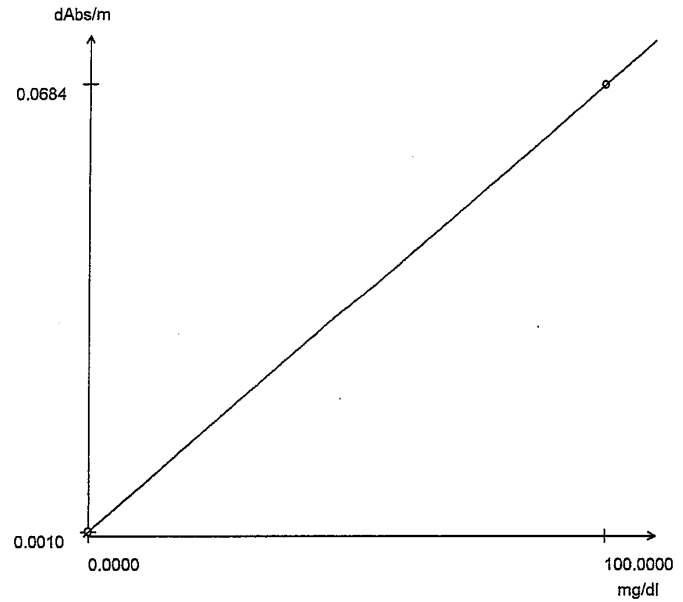
From above-named inmate	To: <u>Manning</u>	Date <u>8/15/09</u>	Time <u>0120</u>
From <u>Manning</u>	To: <u>Emit Box 1</u>	Date <u>8/15/09</u>	Time <u>0121</u>
From <u>Emit Box 1</u>	To: <u>Emit Lab Ref</u>	Date <u>8/15/09</u>	Time <u>0125</u>
From <u>Emit Lab Ref</u>	To: <u>R Barnes</u>	Date <u>8-18-09</u>	Time <u>0700</u>
From <u>R Barnes</u>	To: <u>Emit Lab Ref</u>	Date <u>8-18-09</u>	Time <u>1045</u>
From <u>Emit Lab Ref</u>	To: <u>K Keller</u>	Date <u>8-25-09</u>	Time <u>0700</u>
From <u>K Keller</u>	To: <u>Emit Lab Ref</u>	Date <u>8-25-09</u>	Time <u>0930</u>

#Name?

**CALIBRATION REPORT**

Test name: +Ethyl Alcohol  
Calibrator name: ETOH Cal  
Mode: Kinetic  
Calibration type: Two point  
Calibration accepted: Yes  
Measurement date: 08/17/2009 07:26:04

Conc. (mg/dl)	Reported (dAbs/m)	Replicates (dAbs/m)
0.000	0.001	0.001
100.000	0.068	0.068



**DIVISION OF CORRECTION  
URINALYSIS TEST PROCEDURE****(TO BE COMPLETED ONLY FOR A POSITIVE TEST RESULT)**Inmate Name Roger Terry Number 341358 Specimen Date 8-15-09  
Print Name**PRELIMINARY PROCEDURES:**Time reagents, controls, calibrators, urine specimens (if applicable)removed from refrigerator 0700 Room temperature N/ATime photometer turned on N/ASpecify reagent to be used ETOH Reagent expiration date 5-31-2010Calibrator expiration date 12-31-09 \*\*Control expiration date 8-31-2010\*\*Time of Positive Control Test N/A\*\*Positive Control Response at least 20 units > Calibrator? Yes \_\_\_ No \_\_\_ N/A ✓\*\*Time of Negative Control Test N/A\*\*Negative Control Response at least 20 units < Calibrator? Yes \_\_\_ No \_\_\_ N/A ✓\*\*Control Response within Range Printed on Package? Yes \_\_\_ No \_\_\_ N/A ✓**TESTING OF SPECIMEN:**

Evidence tape intact until broken by Technician? Yes ✓ No \_\_\_

Time of Test 1027 Assay ETOHTechnician Name R Barnes Result PosTechnician Training Syva/Behring Diagnostics, American Correction Association\*\* If not applicable to your machine, please indicate "N/A".  
-----  
-----**I CERTIFY THAT THE ABOVE IS TRUE AND CORRECT**8-18-09  
DateR Barnes  
Test Operator Signature

Printed on 8/18/09  
at 10:43AM  
by rb

**Western Correctional Institution**  
13800 McMullen Hwy  
Cumberland, MD 21502

Accession: 16078

Donor ID: 341358

Name: TERRY, ROGER

Control #:

Test Date: 8/18/09

Test Time: 10:27

Collector: MANNING

Tester: BARNES

Agency: Western Correctional Inst

Requesting Party:

Date Collected: 8/15/09

Time Collected: 0120

Collected by:

Created by: rb

Test	Result	Flag	Reference Range
AMPHETAMINE	0.324	Negative	Cutoff: 1000
BARBITURATE	0.224	Negative	Cutoff: 200
BENZODIAZEPINE	0.276	Negative	
THC50	0.272	Negative	Cutoff: 50
COCN	0.283	Negative	Cutoff: 300
ETOH	<b>56</b>	<b>POSITIVE</b>	Cutoff: 20 mg/dL
OPIA	0.203	Negative	Cutoff: 300
PCP	0.297	Negative	Cutoff: 25

Testing Officer: R Barnes

Reviewed by: rb

**FINAL REPORT**

**DIVISION OF CORRECTION  
URINALYSIS TEST PROCEDURE**

**(TO BE COMPLETED ONLY FOR A POSITIVE TEST RESULT)**

Inmate Name Roger Terry Number 341358 Specimen Date 8-15-09  
Print Name

**PRELIMINARY PROCEDURES:**

Time reagents, controls, calibrators, urine specimens (if applicable)

removed from refrigerator 0700 Room temperature N/A

Time photometer turned on N/A

Specify reagent to be used ETOH Reagent expiration date 5-31-2010

Calibrator expiration date 12-31-09 \*\*Control expiration date 8-31-2010

\*\*Time of Positive Control Test N/A

\*\*Positive Control Response at least 20 units > Calibrator? Yes \_\_\_ No \_\_\_ N/A ☒

\*\*Time of Negative Control Test N/A

\*\*Negative Control Response at least 20 units < Calibrator? Yes \_\_\_ No \_\_\_ N/A ☒

\*\*Control Response within Range Printed on Package? Yes \_\_\_ No \_\_\_ N/A ☒

**TESTING OF SPECIMEN:**

Evidence tape intact until broken by Technician? Yes ☒ No \_\_\_

Time of Test 0855 Assay ETOH

Technician Name K. Keller Result Positive

Technician Training Syva/Behring, Diagnostics, American Correction Association

\*\* If not applicable to your machine, please indicate "N/A".

**I CERTIFY THAT THE ABOVE IS TRUE AND CORRECT**

8-25-09  
Date

K. Keller  
Test Operator Signature

Printed on 8/25/09  
at 8:55AM  
by rb

**Western Correctional Institution**  
13800 McMullen Hwy  
Cumberland, MD 21502

Accession: 16169  
Donor ID: 341358  
Name: TERRY, ROGER  
Control #:

Test Date: 8/25/09 Collector: MANNING  
Test Time: 8:55 Tester: KELLER

Agency: Western Correctional Inst

Requesting Party:  
Date Collected: 8/15/09  
Time Collected: 0120  
Collected by:  
Created by: rb

Test	Result	Flag	Reference Range
ETOH	59	POSITIVE	Cutoff: 20 mg/dL

Testing Officer: 

Reviewed by: rb

**FINAL REPORT**

EXHIBIT 8

000072

**Maryland Division of Correction  
INMATE HEARING RECORD**

Name: Roger Terry DOC# 341358 Violation Date: 8/25/09

Hearing Officer of Record: D. Sipes  
Heard With: N/A

**I: PRELIMINARY MATTERS:**

Defendant inmate appearance: Date: 8/31/2009 Time: 9:30 AM

The hearing officer of record shall document the following for the record:

1. List any request for inmate representation: ☒ Representation waived by inmate.

☐ Yes: Name:

NOTE: If request is denied for procedural cause, state below why:

2. List any request by name for a witness: ☒ Witness(es) waived by inmate.

a: ☐ Yes: Name:

b: List requested witness(es) and state defendant's proffer as to testimony for the witness(es):

c: If inmate witness(es) request is denied for procedural cause, state below why:

3: State any motions, evidence requests, etc. and hearing officer's decision as to such:

4: State any request for postponement and hearing officer's decision as to such:

Name: Roger Terry DOC# 341358 Violation Date: 8/25/09

**II. EVIDENTIARY MATTERS:**

a. Hearing Date: 8/31/2009

b. Name of Facility Representative: CO Buss

c. Defendant Inmate Plea:

Rule	Not Guilty	No Plea	Guilty
301	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d. Argument by Parties and Testimony of Witnesses:

Inmate plead guilty to rule 301 in a plea agreement with the institution for 90 days of seg.

**Maryland Division of Correction  
INMATE HEARING RECORD**

Name: Roger Terry # 341358 Date of Violation: 8/25/09

Hearing Officer of Record: D. Sipes

Heard With: N/A

**III: HEARING OFFICER DECISION:**

Rule	Guilty	Not Guilty	IR	Dismissed	Informal Disposition Sanction
301	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**IV: HEARING OFFICER WRITTEN FINDINGS:**

**A. State all evidence ( list reports, testimony, physical evidence, etc.) weighed and considered at hearing:** K. Keller CO II, Request for Urinalysis, Calibration Report, Urinalysis Test procedure, Final Report, confirmation Test Procedure, Final Report, testimony of inmate

**B. Based on evidence above, state fact findings:**

**C. Based on fact finding above, state your decision:**

Inmate plead guilty to rule 301 in a plea agreement with the institution for 90 days of seg. HO accepts plea and agreement. HO finds the report credible and reliable. The evidence supports the plea.

Name: Roger Terry DOC# 341358 Violation Date: 8/25/09

**V. SANCTIONS:**

**Matrix Adjustment History: poor Effective Date: 8/25/09**

Rule	Category	Seg. Days	CR Days	CC/CS	Revoke GCC
301	III	90	XXX	XXX	XXX

SEG = Segregation CR = Cell Restriction CC = Concurrent CS = Consecutive GCC = Good Conduct Credits

☐ Override- State Reasons:

☐ Other Sanctions:


## VI. RECEIPT OF HEARING RECORD:

Date of Hearing: 8/31/2009

Date of Violation: 8/25/09

Teleconferenced Hearing: N/A

Name and Title of Serving Staff:



8-31-09

DATE

By signing I hereby acknowledge receipt of the hearing officer's decision:

Roger Terry 346-358

Roger Terry #341358

8/31/09

DATE

Distribution: Institution  
Inmate  
Report Staff

## MARYLAND DIVISION OF CORRECTION

## Hearing Decision Review

infraction 8/25/09

Inmate Name Roger Terry 4A11 DOC# 341358 Date of Decision: heard 8/31/09

Rule Violation: Guilty rule 301

I. **Review:** I have reviewed the decision in your case and take the following action:

- ☒ Decision and sanction(s) affirmed.
- ☐ Sanction(s) imposed is modified (see Section III).
- ☐ Decision referred to Commissioner for review.
- ☐ **The decision is remanded for new hearing due to the following reason:**
- ☐ By my order for clarification of the record (see Section III).
- ☐ By order of the: ☐ Commissioner, ☐ Secretary of DPSCS, or ☐ court (see Sections III and V).

II. **Reviewing Authority Signature:**

HARRY Murphy Acting warden 9-17-09  
 Print Name & Title Signature Date

III. **Comments:**

IV. **Service Receipt Record:** A failure to sign for receipt shall be deemed a waiver of the Facility's service obligation.

Inmate Signature: Roger Terry Date: 9/29/09

☐ Inmate ID verified at service and inmate refused to sign for service receipt.

Served By: Coyt Title: PO Date: 9-28-09 Time: 4ed ☐ A.M. ☒ P.M.

V. **Remand Hearing:** Prior to appearance, you are entitled to 24 hours from the date and time of this notice to prepare for your scheduled hearing. You are permitted to request a qualified (per directive procedures) staff or inmate to represent you or as a witness (including reporting staff) for the purposes of your hearing if you list them by name below. Failure to request representation or witnesses below at the time of service shall be deemed a waiver of your right for representation or witnesses at the time of your hearing. You may appeal any guilty finding and/or sanction to the warden within 15 days of the date for receipt of the hearing officer's decision.

Representative: \_\_\_\_\_

Witness: \_\_\_\_\_

Distribution: White - Base File

Yellow - Inmate

JANUARY 15, 2009 RULE 112

8

4B39

Appendix 1 to DCD 105-9

## MARYLAND DIVISION OF CORRECTION

## Hearing Decision Review

Inmate Name Roger Terry 4B39B DOC# 341358 <sup>infraction 1/15/10</sup> Date of Decision: heard 1/19/10

Rule Violation: Guilty rule 112

I. **Review:** I have reviewed the decision in your case and take the following action:

- ☒ Decision and sanction(s) affirmed.  
☐ Sanction(s) imposed is modified (see Section III).  
☐ Decision referred to Commissioner for review.  
☐ **The decision is remanded for new hearing due to the following reason:**  
☐ By my order for clarification of the record (see Section III).  
☐ By order of the: ☐ Commissioner, ☐ Secretary of DPSCS, or ☐ court (see Sections III and V).

II. **Reviewing Authority Signature:**

Harvey Murphy Acting Warden [Signature] 2-17-10  
 Print Name & Title Signature Date

III. **Comments:**

IV. **Service Receipt Record:** A failure to sign for receipt shall be deemed a waiver of the Facility's service obligation.

Inmate Signature: Roger Terry Date: 2-23-2010  
☐ Inmate ID verified at service and inmate refused to sign for service receipt.

Served By: B. Blamble Title: CAF Date: 2/23/10 Time: 12:50 ☐ A.M. ☒ P.M.

V. **Remand Hearing:** Prior to appearance, you are entitled to 24 hours from the date and time of this notice to prepare for your scheduled hearing. You are permitted to request a qualified (per directive procedures) staff or inmate to represent you or as a witness (including reporting staff) for the purposes of your hearing if you list them by name below. Failure to request representation or witnesses below at the time of service shall be deemed a waiver of your right for representation or witnesses at the time of your hearing. You may appeal any guilty finding and/or sanction to the warden within 15 days of the date for receipt of the hearing officer's decision.

Representative: \_\_\_\_\_

Witness: \_\_\_\_\_

Distribution: White - Base File

Yellow - Inmate



8A5 4-B-39B

Appendix 1 to DCD 105-4

MARYLAND DIVISION OF CORRECTION  
NOTICE OF INMATE RULE VIOLATION AND DISCIPLINARY HEARING

Inmate Name: ROGER TERRY DOC#: 341358 Facility: WCI Housing: SD-44B  
Violation: Date: 1-15-10 Time: 0743 AM/PM. Recommended charge: 112

Under the provisions of DCD 110-15 and WCI ID 110-11-1, the subject was SPOTCHECK selected from the general population for urine sampling on 1/13/10 at 0107. The collecting Officer Robinson, using the inmate's ID card for positive identification, observed the subject giving the sample. Collecting Officer identified the sample with the subject's name, number, and date of collection. The sample was then placed in the Urine Testing Station at WCI. The primary test was done on 1/14/10 at 1048 and was conducted by R. Barnes, CO-II using the EMIT II Plus OPIATE Assay. The assay tested positive for OPIATE. The confirming test was done on 1/15/10 at 0743 and was conducted by R. Barnes CO-II using the EMIT II Plus OPIATE Assay. The assay tested positive for OPIATE. Both positive assays were conducted by personnel who are qualified to administer the above chemical test within the requirements of the American Correctional Association, and the Division of Correction, State of Maryland.

I solemnly affirm under the penalties of perjury and upon personal knowledge that the facts set forth in the above report are true.

Reporting Staff: R. Barnes, CO-II R. Barnes 1/15/10  
Print Name and Title Signature Date

1. **Supervisory Review:** The above report has been reviewed with the following action taken:
  - a. **Action Taken:** ☒ Formal Hearing ☒ Administrative Segregation Assignment ☐ Use of Force ☐ Contraband Disposition ☐ Incident Report
  - b. Rule Violation Charged: 112
  - c. ☐ Informal Disposition: Rule Violation: \_\_\_\_\_ Sanction: \_\_\_\_\_ Effective Date: \_\_\_\_\_
  - d. **Informal Service:** I understand by my signature below that: I waive a hearing by a hearing officer on the offenses charged, this report and informal action will be placed on my OBSCIS & in my facility file records, and where applicable I accept the offer of informal disposition sanction.

Inmate Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

e. **Comments:** Charge; Warrant Formal Hearing, Inmate Placed ON A.S.P.A.

f. **Shift Supervisor:** J. France COI J. France 1-15-10  
Print Name and Title Signature Date

2. **Administrative Segregation Assignment Review:** The recommendation has been reviewed and I ☒ Approve or ☐ Disapprove.  
Shift Commander: B. E. Mangus COC B. E. Mangus 1/15/10  
Print Name and Title Signature Date

3. **Formal Hearing Service:** A. Preparation: You are entitled to 24 hours from the date and time of receipt of this notice before you may appear before a hearing officer to answer to the offenses charged in this notice. B. Representation: You may request representation by staff or a qualified inmate from the general population of this facility if you indicate their name below. A failure to list a name below shall be deemed at your hearing as a waiver of your right to representation. C. Witnesses: You may request for your hearing any witness who is relevant, material, & non-cumulative that may include staff and/or the reporting staff if you indicate them by name below. A failure to list by name below shall be deemed at your hearing as a waiver of your right to call witnesses.

Representative: Felix Fitzgerald Witness: \_\_\_\_\_

4. **Appeal:** You may appeal a guilty decision and/or sanction in writing to the warden within 15 calendar days of receipt for the hearing officer's decision.
5. **Service of Notice:** Signature below is only acknowledgment for receipt of notice copy. Refusal to sign is deemed waiver of service obligation by the facility.

**Waiver of 24 Hour Notice:** ☐ I waive 24 hour notice and request to appear before a hearing officer as soon as possible.

Inmate's Signature: Roger Terry DOC #: 341-358 Date: 1-15-2010

☒ Inmate ID verified ☐ Copy given but inmate refused to sign for service ☐ Inmate requested no rep. or witness at service

Notice Served By: G. Wilson COII G. Wilson 1-15-10 1355  
Print Name and Title Signature Date and Time

Distribution: White Copy—Base File Yellow Copy—Inmate Pink Copy—Facility  
DC Form 105-4a (Rev. Feb. 07)

**REQUEST FOR URINALYSIS TEST**INMATE ROGER TERRY Print Name NUMBER: 341358INSTITUTION: WCI HU5-D-044-BRequest made by BURKETT Print Name Date 1/12/2010Circumstances Leading to Request Spot/Suspicious behaviorRequest That Specimen be Tested for ALL CDSRequest Approved by D. Creek COL Sign Name Date 1-13-10I, ROBINSON Print Name hereby certify that the following is true and correct:

The above named inmate, whose identity was verified by (check one) ☒ I.D. Card ☐ Escort Card,  
 was told that he/she is being ordered to submit a urine specimen on the following basis:  
 (check one) ☒ Spot check; ☐ Routine; ☐ Random.

The above-named inmate was asked if he/she had taken any medication in the past 30 days and he/she replied  
 (check one) ☒ that he/she has not ☐ that he/she has. If he/she has, complete DC Form 110-15-  
 eR, Appendix 5

The above-named inmate (check one) ☐ refused to submit a urine specimen: ☒ submitted a urine  
 specimen in my presence in a specimen container labeled with the name of the institution/facility, name and commitment  
 number of the inmate, date of collection, the name of the collecting officer and thereafter the inmate handed the  
 specimen container to me. I thereafter sealed the specimen container with evidence tape, and maintained exclusive  
 possession and control of the bottle until I transferred it from my possession and control as indicated below.

1-13-10 Date R. J. SIGNATURE 341-358 INMATES INITIALS

**CHAIN-OF-CUSTODY OF SPECIMEN**

From above-named inmate	To: <u>Rabin</u>	Date <u>1-13-10</u>	Time <u>0107</u>
From <u>Rabin</u>	To: <u>Emt Box 1</u>	Date <u>"</u>	Time <u>0108</u>
From <u>Emt Box 1</u>	To: <u>Emt Lab Ref</u>	Date <u>"</u>	Time <u>0135</u>
From <u>Emt Lab Ref</u>	To: <u>R Barnes</u>	Date <u>1-14-10</u>	Time <u>0800</u>
From <u>R Barnes</u>	To: <u>Emt Lab Ref</u>	Date <u>1-14-10</u>	Time <u>1115</u>
From <u>Emt Lab Ref</u>	To: <u>R Barnes</u>	Date <u>1-15-10</u>	Time <u>0700</u>
From <u>R Barnes</u>	To: <u>Emt Lab Ref</u>	Date <u>1-15-10</u>	Time <u>0810</u>

#Name?

V Twin Current Calibrations

Date	Assay	Rate 1	Rate 2	Avg Rate	Dup Dif	Dup Dif Ref
1/11/10	AMPH	0.492	0.490	0.491	0.002	0.015
1/11/10	BARB	0.300	0.301	0.301	0.001	0.015
1/11/10	BENZ	0.361	0.363	0.362	0.002	0.015
1/11/10	C50	0.312	0.313	0.313	0.001	0.015
1/11/10	COCN	0.382	0.380	0.381	0.002	0.015
	ETOH	Not Used	Not Used	Not Used	Not Used	
1/11/10	OPIA	0.259	0.260	0.26	0.001	0.015
1/11/10	PCP	0.417	0.415	0.416	0.002	0.015

**DIVISION OF CORRECTION  
URINALYSIS TEST PROCEDURE**

(TO BE COMPLETED ONLY FOR A POSITIVE TEST RESULT)

Inmate Name Roger Terry Number 341358 Specimen Date 1-13-10  
Print Name

**PRELIMINARY PROCEDURES:**

Time reagents, controls, calibrators, urine specimens (if applicable)

removed from refrigerator 0800 Room temperature N/A

Time photometer turned on N/A

Specify reagent to be used Opiate Reagent expiration date 12-31-2010

Calibrator expiration date 3-31-2010 \*\*Control expiration date 3-31-2010

\*\*Time of Positive Control Test N/A

\*\*Positive Control Response at least 20 units > Calibrator? Yes \_\_\_ No \_\_\_ N/A ☒

\*\*Time of Negative Control Test N/A

\*\*Negative Control Response at least 20 units < Calibrator? Yes \_\_\_ No \_\_\_ N/A ☒

\*\*Control Response within Range Printed on Package? Yes \_\_\_ No \_\_\_ N/A ☒

**TESTING OF SPECIMEN:**

Evidence tape intact until broken by Technician? Yes ☒ No \_\_\_

Time of Test 1048 Assay Opiate

Technician Name R. Barnes Result POS

Technician Training Syva/Behring Diagnostics, American Correction Association

\*\* If not applicable to your machine, please indicate "N/A".

**I CERTIFY THAT THE ABOVE IS TRUE AND CORRECT**

1-14-10

Date

R Barnes

Test Operator Signature

Printed on 1/14/10  
at 11:05AM  
by rb

**Western Correctional Institution**  
13800 McMullen Hwy  
Cumberland, MD 21502

Agency: Western Correctional Inst

Accession: 18122

Donor ID: 341358

Name: TERRY, ROGER

Control #:

Test Date: 1/14/10

Test Time: 10:48

Collector: ROBINSON

Tester: BARNES

Requesting Party:

Date Collected: 1/13/10

Time Collected: 0107

Collected by:

Created by: rb

Test	Result	Flag	Reference Range
AMPHETAMINE	0.327	Negative	Cutoff: 1000
BARBITURATE	0.279	Negative	Cutoff: 200
BENZODIAZEPINE	0.281	Negative	
THC50	0.272	Negative	Cutoff: 50
COCN	0.297	Negative	Cutoff: 300
ETOH	0	Negative	Cutoff: 20 mg/dL
OPIA	<b>0.265</b>	<b>POSITIVE</b>	Cutoff: 300
PCP	0.319	Negative	Cutoff: 25

Testing Officer:

R Barnes

Reviewed by: rb

**FINAL REPORT**

EXHIBIT 8

000085

**DIVISION OF CORRECTION  
URINALYSIS TEST PROCEDURE****(TO BE COMPLETED ONLY FOR A POSITIVE TEST RESULT)**Inmate Name Roger Terry Number 341358 Specimen Date 1-13-10  
Print Name**PRELIMINARY PROCEDURES:**Time reagents, controls, calibrators, urine specimens (if applicable)removed from refrigerator 0700 Room temperature N/ATime photometer turned on N/ASpecify reagent to be used Opiate Reagent expiration date 12-31-2010Calibrator expiration date 3-31-2010 \*\*Control expiration date 3-31-2010\*\*Time of Positive Control Test N/A\*\*Positive Control Response at least 20 units > Calibrator? Yes \_\_\_ No \_\_\_ N/A ✓\*\*Time of Negative Control Test N/A\*\*Negative Control Response at least 20 units < Calibrator? Yes \_\_\_ No \_\_\_ N/A ✓\*\*Control Response within Range Printed on Package? Yes \_\_\_ No \_\_\_ N/A ✓**TESTING OF SPECIMEN:**

Evidence tape intact until broken by Technician? Yes ✓ No \_\_\_

Time of Test 0743 Assay OpiateTechnician Name R Barnes Result PosTechnician Training Syva/Behring Diagnostics, American Correction Association

\*\* If not applicable to your machine, please indicate "N/A".

**I CERTIFY THAT THE ABOVE IS TRUE AND CORRECT**1-15-10

Date

R Barnes

Test Operator Signature

Printed on 1/15/10  
at 7:43AM  
by rb

**Western Correctional Institution**  
13800 McMullen Hwy  
Cumberland, MD 21502

Accession: 18150  
Donor ID: 341358  
Name: TERRY, ROGER  
Control #:

Test Date: 1/15/10 Collector: ROBINSON  
Test Time: 7:43 Tester: BARNES

Agency: Western Correctional Inst

Requesting Party:  
Date Collected: 1/13/10  
Time Collected: 0107  
Collected by:  
Created by: rb

Test	Result	Flag	Reference Range
OPIA	0.266	POSITIVE	Cutoff: 300

Testing Officer: R Barnes

Reviewed by: rb

**FINAL REPORT**

**Maryland Division of Correction  
INMATE HEARING RECORD**

Name: Roger Terry DOC# 341358 Violation Date: 1/15/10

Hearing Officer of Record: Jon Sandstrom  
Heard With: N/A

41339

**I: PRELIMINARY MATTERS:**

Defendant inmate appearance: Date: 1/19/2010 Time: 10:22 AM

The hearing officer of record shall document the following for the record:

**1. List any request for inmate representation: ☒ Representation waived by inmate.**☐ **Yes: Name: elected to represent himself****NOTE: If request is denied for procedural cause, state below why:****2: List any request by name for a witness: ☒ Witness(es) waived by inmate.**a: ☐ **Yes: Name:****b: List requested witness(es) and state defendant's proffer as to testimony for the witness(es):****c: If inmate witness(es) request is denied for procedural cause, state below why:****3: State any motions, evidence requests, etc. and hearing officer's decision as to such:****4: State any request for postponement and hearing officer's decision as to such:**

**INMATE HEARING RECORD**

Appendix 2 to DCD 105-7

Name: Roger Terry DOC# 341358 Violation Date: 1/15/10

**II. EVIDENTIARY MATTERS:****a. Hearing Date:** 1/19/2010**b. Name of Facility Representative:** Sgt. Slate**c. Defendant Inmate Plea:**

Rule	Not Guilty	No Plea	Guilty
112	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**d. Argument by Parties and Testimony of Witnesses:**

**Maryland Division of Correction  
INMATE HEARING RECORD**

Name: Roger Terry # 341358 Date of Violation: 1/15/10

Hearing Officer of Record: Jon Sandstrom  
Heard With: N/A**III: HEARING OFFICER DECISION:**

Rule	Guilty	Not Guilty	IR	Dismissed	Informal Disposition Sanction
112	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**IV: HEARING OFFICER WRITTEN FINDINGS:**

**A. State all evidence ( list reports, testimony, physical evidence, etc.) weighed and considered at hearing:** notice of violation: C/O Barnes; paperwork associated with DCD110-15 and machine printout

**B. Based on evidence above, state fact findings:**

**C. Based on fact finding above, state your decision:**  
H/O accepts above evidence and inmate's guilty plea.

**INMATE HEARING RECORD**

Appendix 2 to DCD 105-7

Name: Roger Terry DOC# 341358 Violation Date: 1/15/10

**V. SANCTIONS:****Matrix Adjustment History: poor Effective Date: 1/15/10**

Rule	Category	Seg. Days	CR Days	CC/CS	Revoke GCC
112	I	150	XXX		XXX

SEG = Segregation CR = Cell Restriction CC = Concurrent CS = Consecutive GCC = Good Conduct Credits

☒ Override- State Reasons: mandatory override DCD105-8, rule 102, 12/08☒ Other Sanctions: suspend visits for six (6) months from 1/19/2010

VI. RECEIPT OF HEARING RECORD:

Date of Hearing: 1/19/2010

Date of Violation: 1/15/10

Teleconferenced Hearing: yes

Name and Title of Serving Staff:

Blank 1/19/10  
DATE

By signing I hereby acknowledge receipt of the hearing officer's decision:

Roger Terry 341-358 1-19-2010  
Roger Terry #341358 DATE

Distribution: Institution  
Inmate  
Report Staff

## INMATE HEARING RECORD

Appendix 2 to DCD 105-7

4B39B

Name: Roger Terry DOC# 341358 Date of Violation: 1/15/10

Hearing Officer of Record: Jon Sandstrom Hearing Date: 1/19/2010

EASTERN  
CORRECTIONAL  
INSTITUTION  
WARDEN'S OFFICE

G-112

APPEAL of HEARING OFFICER DECISION

2010 JAN 20 A 8:25

RECEIVED

Under COMAR 12.02.27.33, a defendant inmate may only appeal a formal disciplinary hearing decision and/or sanction. If you wish to appeal, you may use this form for that purpose. Do not use Administrative Remedy Procedure forms for your appeal. Your appeal must be submitted to the warden of the facility where you are housed at the time of the appeal so that it is received by the warden within 15 calendar days from the date you received the hearing officer's decision. You may continue on the reverse (please indicate such) and use additional pages if needed (when doing so please indicate the total number). A failure to appeal within the stated 15 calendar days will be deemed a waiver of an appeal.

State Reasons for Appeal of the Hearing Officer's Decision and/or Sanction:

My 1<sup>st</sup> reason for appeal is that to the best of my knowledge the officer who conducts the primary test (R. Barnes, CO 11) should not have been the officer who conducted the confirming test as long as there was another officer available to conduct the test in a reasonable time frame. Also on August 29<sup>th</sup> 2008 I was placed on lock up for coffee that tested positive for Amphetamine and received 200 lock-up days for, loss of visits for 6 months which later got over turned because the state police stated there were "no CDS Detected". So at that time I did 200 seg days for nothing and all my property was destroyed. The same officer R. Barnes, CO 11 was the officer who conducted that test also and confirmed it. I am asking that you consider the possibility that an error could have been made and since I have not the means to be tested by an outside entity I have no grounds to argue my complete innocence. That is why I plead guilty. No matter what I say I would've been found guilty because of the test results. I am asking for leniency or a possible time cut. Thank you for your time and your patience.

Signature: Roger TerryDate: 1-19-2010



## Department of Public Safety and Correctional Services

### Division of Correction Western Correctional Institution

13800 McMULLEN HIGHWAY, SW • CUMBERLAND, MARYLAND 21502  
(301) 729-7000 • FAX (301) 729-7024 • TTY USERS 1-800-735-2258 • www.dpscs.state.md.us

STATE OF MARYLAND

MARTIN O'MALLEY  
GOVERNOR

ANTHONY G. BROWN  
LT. GOVERNOR

GARY D. MAYNARD  
SECRETARY

G. LAWRENCE FRANKLIN  
DEPUTY SECRETARY

DIVISION OF CORRECTION

J. MICHAEL STOUFFER  
COMMISSIONER

WESTERN  
CORRECTIONAL  
INSTITUTION

J. PHILIP MORGAN  
WARDEN

HARRY B. MURPHY, Ph.D.  
ASSISTANT WARDEN

K. DANIEL NORTHCRAFT  
CHIEF OF SECURITY

**TO:** Roger Terry DOC# 341358 HU 4B39B

**FROM:** J. Philip Morgan, Warden *J. Philip Morgan acting warden for:*

**DATE:** 2-17-10

**SUBJECT:** Adjustment Acknowledgement Memo

Your Adjustment Appeal was:

- ☒ Received in my office in a timely manner
  - ☒ however, the Hearing Officer's decision remains
  - ☐ however, your Adjustment sanction was reduced
  - ☐ however, your Adjustment sanction was reduced to an Incident Report
  - ☐ however, your Adjustment was reduced to an Informal Disposition
- ☐ Was not received in my office in a timely manner  
(you have fifteen [15] days [to include the date of your hearing – weekends and holidays are taken into consideration] to appeal the Hearing Officer's decision
  - ☐ however, the Hearing Officer's decision remains, however, your Adjustment sanction was reduced
  - ☐ however, your Adjustment sanction was reduced to an Incident Report
  - ☐ however, your Adjustment was reduced to an Informal Disposition

This is acknowledgement that I have reviewed your Adjustment Appeal.

JPM/rme

Basefile w/Adjustment dated: 1/15/10

JULY 8, 2010

RULE 112

## MARYLAND DIVISION OF CORRECTION

## Hearing Decision Review

Inmate Name Roger Terry 5B23 DOC# 341358 Date of Decision: heard 7/12/10 infracton 7/8/10

Rule Violation: Guilty rule 112

I. **Review:** I have reviewed the decision in your case and take the following action:

- ☒ Decision and sanction(s) affirmed.  
☐ Sanction(s) imposed is modified (see Section III).  
☐ Decision referred to Commissioner for review.  
☐ **The decision is remanded for new hearing due to the following reason:**  
☐ By my order for clarification of the record (see Section III).  
☐ By order of the: ☐ Commissioner, ☐ Secretary of DPSCS, or ☐ court (see Sections III and V).

II. **Reviewing Authority Signature:**

<u><i>William L. Darden</i></u>	<u><i>W. Magm</i></u>	<u>8/4/10</u>
Print Name & Title	Signature	Date

III. **Comments:**

IV. **Service Receipt Record:** A failure to sign for receipt shall be deemed a waiver of the Facility's service obligation.

Inmate Signature: Roger Terry Date: 8-12-2010  
☐ Inmate ID verified at service and inmate refused to sign for service receipt.

Served By: G. Wilson Title: CGT Date: 8-12-10 Time: 1401 ☐ A.M. ☒ P.M.

V. **Remand Hearing:** Prior to appearance, you are entitled to 24 hours from the date and time of this notice to prepare for your scheduled hearing. You are permitted to request a qualified (per directive procedures) staff or inmate to represent you or as a witness (including reporting staff) for the purposes of your hearing if you list them by name below. Failure to request representation or witnesses below at the time of service shall be deemed a waiver of your right for representation or witnesses at the time of your hearing. You may appeal any guilty finding and/or sanction to the warden within 15 days of the date for receipt of the hearing officer's decision.

Representative: \_\_\_\_\_

Witness: \_\_\_\_\_

Distribution: White - Base File Yellow - Inmate

MARYLAND DIVISION OF CORRECTION  
NOTICE OF INMATE RULE VIOLATION AND DISCIPLINARY HEARING

SAB

5B23B

Appendix 1 to DCD 105-4

Inmate Name: Roger Terry DOC#: 341358 Facility WCI Housing: 3C-38  
Violation: Date: 7-8-10 Time: 0755 AM PM. Recommended charge: 112

**Reported facts:** Under the provisions of DCD 110-15 and WCI ID 110-11-1, the subject was **SPOTCHECK** selected from the inmate population for urine sampling on 7/2/10 at 0058. The collecting Officer Robinson, using the inmate's ID card for positive identification, observed the subject giving the sample. Collecting Officer identified the sample with the subject's name, number, and date of collection. The sample was then placed in the Urine Testing Station at WCI. The primary test was done on 7/7/10 at 0917 and was conducted by R. Barnes, CO-II using the EMIT II Plus **OPIATE** Assay. The assay tested positive for **OPIATE**. The confirming test was done on 7/8/10 at 0755 and was conducted by R Barnes COII using the EMIT II Plus **OPIATE** Assay. The assay tested positive for **OPIATE**. Both positive assays were conducted by personnel who are qualified to administer the above chemical test within the requirements of the American Correctional Association, and the Division of Correction, State of Maryland.

**I solemnly affirm under the penalties of perjury and upon personal knowledge that the facts set forth in the above report are true.**

Reporting Staff: R. Barnes, CO-II R Barnes 7/8/10  
*Print Name and Title* *Signature* *Date*

1. **Supervisory Review:** The above report has been reviewed with the following action taken:
- a. **Action Taken:** ☒ Formal Hearing ☒ Administrative Segregation Assignment ☐ Use of Force ☐ Contraband Disposition ☐ Incident Report
- b. Rule Violation Charged: 112
- c. ☐ **Informal Disposition:** Rule Violation: \_\_\_\_\_ Sanction: \_\_\_\_\_ Effective Date: \_\_\_\_\_
- d. **Informal Service:** I understand by my signature below that: I waive a hearing by a hearing officer on the offenses charged, this report and informal action will be placed on my OBCSIS & in my facility file records, and where applicable I accept the offer of informal disposition sanction.

Inmate Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

- e. **Comments:** \_\_\_\_\_
- f. **Shift Supervisor:** DW Norris, Coe [Signature] 7/8/10  
Print Name and Title Signature Date

2. **Administrative Segregation Assignment Review:** The recommendation has been reviewed and I ☒ **Approve** or ☐ **Disapprove**.
- Shift Commander: M. P. Thomas major MPT 7-8-10  
Print Name and Title Signature Date

3. **Formal Hearing Service:** A. *Preparation:* You are entitled to 24 hours from the date and time of receipt of this notice before you may appear before a hearing officer to answer to the offenses charged in this notice. B. *Representation:* You may request representation by staff or a qualified inmate from the general population of this facility if you indicate their name below. A failure to list a name below shall be deemed at your hearing as a waiver of your right to representation. C. *Witnesses:* You may request for your hearing any witness who is relevant, material, & non-cumulative that may include staff and/or the reporting staff if you indicate them by name below. A failure to list by name below shall be deemed at your hearing as a waiver of your right to call witnesses.

Representative: \_\_\_\_\_ Witness: \_\_\_\_\_

4. **Appeal:** You may appeal a guilty decision and/or sanction in writing to the warden within 15 calendar days of receipt for the hearing officer's decision.
5. **Service of Notice:** Signature below is only acknowledgment for receipt of notice copy. Refusal to sign is deemed waiver of service obligation by the facility.

**Waiver of 24 Hour Notice:** ☐ I waive 24 hour notice and request to appear before a hearing officer as soon as possible.

Inmate's Signature: Roger Perry DOC #: 341-358 Date: 7-8-2010  
☒ Inmate ID verified ☒ Copy given but inmate refused to sign for service ☒ Inmate requested no rep. or witness at service

Notice Served By: F. Fair T Co II F. Fair 7-08-10 1515  
 Print Name and Title Signature Date and Time

**Distribution:**                      **White Copy—Base File**                      **Yellow Copy—Inmate**                      **Pink Copy—Facility**  
 DC Form 105-4a (Rev. Feb. 07)

**REQUEST FOR URINALYSIS TEST**INMATE ROGER TERRY Print Name NUMBER: 341358INSTITUTION: WCI HU3-C-038-ARequest made by Sgt Beeman Print Name Date 7/2/2010Circumstances Leading to Request Spot/Suspicious behaviorRequest That Specimen be Tested for ALL CDSRequest Approved by D.P. H. [Signature] COL Sign Name Date 7.2.10I, E ROBINSON Print Name hereby certify that the following is true and correct:

The above named inmate, whose identity was verified by (check one) ☒ I.D. Card ☐ Escort Card,  
 was told that he/she is being ordered to submit a urine specimen on the following basis:  
 (check one) ☒ Spot check; ☐ Routine; ☐ Random.

The above-named inmate was asked if he/she had taken any medication in the past 30 days and he/she replied  
 (check one) ☐ that he/she has not ☒ that he/she has. If he/she has, complete DC Form 110-15-  
 eR, Appendix 5

The above-named inmate (check one) ☐ refused to submit a urine specimen: ☒ submitted a urine  
 specimen in my presence in a specimen container labeled with the name of the institution/facility, name and commitment  
 number of the inmate, date of collection, the name of the collecting officer and thereafter the inmate handed the  
 specimen container to me. I thereafter sealed the specimen container with evidence tape, and maintained exclusive  
 possession and control of the bottle until I transferred it from my possession and control as indicated below:

7-2-10  
DateE Robinson  
SIGNATURER.T 341-358  
INMATES INITIALS**CHAIN-OF-CUSTODY OF SPECIMEN**

From above-named inmate	To: <u>E Robinson</u>	Date <u>7-2-10</u>	Time <u>0058</u>
From <u>E Robinson</u>	To: <u>Emil Box 5</u>	Date <u>"</u>	Time <u>0059</u>
From <u>Emil Box 5</u>	To: <u>Emil Lab ref'g</u>	Date <u>"</u>	Time <u>0245</u>
From <u>Emil Lab Ref</u>	To: <u>R Barnes</u>	Date <u>7-7-10</u>	Time <u>0700</u>
From <u>R Barnes</u>	To: <u>Emil Lab Ref</u>	Date <u>7-7-10</u>	Time <u>1300</u>
From <u>Emil Lab Ref</u>	To: <u>R Barnes</u>	Date <u>7-8-10</u>	Time <u>0700</u>
From <u>R Barnes</u>	To: <u>Emil Lab Ref</u>	Date <u>7-8-10</u>	Time <u>0810</u>

#Name?

V Twin Current Calibrations

Date	Assay	Rate 1	Rate 2	Avg Rate	Dup Dif	Dup Dif Ref
7/06/10	AMPH	0.456	0.460	0.458	0.004	0.015
7/06/10	BARB	0.300	0.301	0.301	0.001	0.015
7/06/10	BENZ	0.364	0.362	0.366	0.008	0.015
7/06/10	C50	0.306	0.306	0.306	0	0.015
7/06/10	COGN	0.371	0.373	0.373	0.001	0.015
	ETOH	Not Used	Not Used	Not Used	Not Used	
7/06/10	OPIA	0.273	0.272	0.273	0.002	0.015
7/06/10	PCP	0.395	0.392	0.394	0.003	0.015

**DIVISION OF CORRECTION  
URINALYSIS TEST PROCEDURE**

**(TO BE COMPLETED ONLY FOR A POSITIVE TEST RESULT)**

Inmate Name Roger Terry Number 341358 Specimen Date 7-2-10  
Print Name

**PRELIMINARY PROCEDURES:**

Time reagents, controls, calibrators, urine specimens (if applicable)

removed from refrigerator 0700 Room temperature N/A

Time photometer turned on N/A

Specify reagent to be used Opial Reagent expiration date 1-31-11

Calibrator expiration date 12-31-10 \*\*Control expiration date 11-30-10

\*\*Time of Positive Control Test N/A

\*\*Positive Control Response at least 20 units > Calibrator? Yes \_\_\_ No \_\_\_ N/A ☒

\*\*Time of Negative Control Test N/A

\*\*Negative Control Response at least 20 units < Calibrator? Yes \_\_\_ No \_\_\_ N/A ☒

\*\*Control Response within Range Printed on Package? Yes \_\_\_ No \_\_\_ N/A ☒

**TESTING OF SPECIMEN:**

Evidence tape intact until broken by Technician? Yes ☒ No \_\_\_

Time of Test 0917 Assay Opial

Technician Name R Baenes Result Pos

Technician Training Syva/Behring Diagnostics, American Correction Association

\*\* If not applicable to your machine, please indicate "N/A".

**I CERTIFY THAT THE ABOVE IS TRUE AND CORRECT**

7-7-10

Date

R Baenes

Test Operator Signature

Printed on 7/07/10  
at 9:23AM  
by rb

Western Correctional Institution  
13800 McMullen Hwy  
Cumberland, MD 21502

Accession: 20813  
Donor ID: 341358  
Name: TERRY, ROGER  
Control #:  
Test Date: 7/07/10  
Test Time: 9:17

Collector: ROBINSON  
Tester: BARNES

Agency: Western Correctional Inst  
Requesting Party:  
Date Collected: 7/02/10  
Time Collected: 0058  
Collected by:  
Created by: rb

Test	Result	Flag	Reference Range
AMPHETAMINE	0.303	Negative	Cutoff: 1000
BARBITURATE	0.230	Negative	Cutoff: 200
BENZODIAZEPINE	0.289	Negative	
THC50	0.270	Negative	Cutoff: 50
COCN	0.280	Negative	Cutoff: 300
ETOH	0	Negative	Cutoff: 20 mg/dL
OPIA	<b>0.296</b>	<b>POSITIVE</b>	Cutoff: 300
PCP	0.299	Negative	Cutoff: 25

Testing Officer: R Barnes

Reviewed by: rb

FINAL REPORT

EXHIBIT 8

000101

**DIVISION OF CORRECTION  
URINALYSIS TEST PROCEDURE**

**(TO BE COMPLETED ONLY FOR A POSITIVE TEST RESULT)**

Inmate Name Roger Terry Number 341358 Specimen Date 7-2-10  
Print Name

**PRELIMINARY PROCEDURES:**

Time reagents, controls, calibrators, urine specimens (if applicable)

removed from refrigerator 0700 Room temperature N/A

Time photometer turned on N/A

Specify reagent to be used Opiate Reagent expiration date 1-31-11

Calibrator expiration date 12-31-10 \*\*Control expiration date 11-30-10

\*\*Time of Positive Control Test N/A

\*\*Positive Control Response at least 20 units > Calibrator? Yes \_\_\_ No \_\_\_ N/A ☒

\*\*Time of Negative Control Test N/A

\*\*Negative Control Response at least 20 units < Calibrator? Yes \_\_\_ No \_\_\_ N/A ☒

\*\*Control Response within Range Printed on Package? Yes \_\_\_ No \_\_\_ N/A ☒

**TESTING OF SPECIMEN:**

Evidence tape intact until broken by Technician? Yes ☒ No \_\_\_

Time of Test 0755 Assay Opiate

Technician Name R Barnes Result Pos

Technician Training Syva/Behring Diagnostics, American Correction Association

\*\* If not applicable to your machine, please indicate "N/A".

**I CERTIFY THAT THE ABOVE IS TRUE AND CORRECT**

7-8-10

Date

R Barnes

Test Operator Signature

Printed on 7/08/10  
at 8:06AM  
by rb

**Western Correctional Institution**  
13800 McMullen Hwy  
Cumberland, MD 21502

Accession: 20877  
Donor ID: 341358  
Name: TERRY, ROGER

Control #:   
Test Date: 7/08/10 Collector: ROBINSON  
Test Time: 7:55 Tester: BARNES

Agency: Western Correctional Inst

Requesting Party:  
Date Collected: 7/02/10  
Time Collected: 0058  
Collected by:  
Created by: rb

Test	Result	Flag	Reference Range
OPIA	0.292	POSITIVE	Cutoff: 300

Testing Officer: R Barnes

Reviewed by: rb

**FINAL REPORT**

Maryland Division of Correction  
INMATE HEARING RECORD

51323

Name: Roger Terry DOC# 341358 Violation Date: 7/8/10

Hearing Officer of Record: Frederick Joseph Nastri  
Heard With:**I: PRELIMINARY MATTERS:**

Defendant inmate appearance: Date: 7/12/2010 Time: 11:17 AM

The hearing officer of record shall document the following for the record:

**1. List any request for inmate representation: ☒ Representation waived by inmate.**☐ Yes: Name:**NOTE: If request is denied for procedural cause, state below why:****2. List any request by name for a witness: ☒ Witness(es) waived by inmate.**a: ☐ Yes: Name:

b: List requested witness(es) and state defendant's proffer as to testimony for the witness(es):

c: If inmate witness(es) request is denied for procedural cause, state below why:

**3. State any motions, evidence requests, etc. and hearing officer's decision as to such:****4. State any request for postponement and hearing officer's decision as to such:**

**INMATE HEARING RECORD**

Appendix 2 to DCD 105-7

Name: Roger Terry DOC# 341358 Violation Date: 7/8/10

**II. EVIDENTIARY MATTERS:**

a. Hearing Date: 7/12/2010

b. Name of Facility Representative: Slate

c. Defendant Inmate Plea:

Rule	Not Guilty	No Plea	Guilty
112	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d. Argument by Parties and Testimony of Witnesses:

Violation report and testimony of defendant who pleads guilty to the cited rule(s).

**Maryland Division of Correction  
INMATE HEARING RECORD**

Name: Roger Terry # 341358 Date of Violation: 7/8/10

Hearing Officer of Record: Frederick Joseph Nasti  
Heard With:

**III: HEARING OFFICER DECISION:**

Rule	Guilty	Not Guilty	IR	Dismissed	Informal Disposition Sanction
112	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**IV: HEARING OFFICER WRITTEN FINDINGS:**

A. State all evidence ( list reports, testimony, physical evidence, etc.) weighed and considered at hearing: Violation report and the defendant pleading guilty:

B. Based on evidence above, state fact findings:  
That the defendant did violate the stated rules and that the evidence validates his plea.

C. Based on fact finding above, state your decision:  
Guilty finding is supported by all evidence weighed and considered and that the defendants plea was found to be entered freely and voluntarily and that a plea recommendation was made and that same was considered by hearing officer and if so modified was done so with defendants knowledge and understanding and his signature affixed is evidence of his agreement to his plea of guilt.

Name: Roger Terry DOC# 341358 Violation Date: 7/8/10

**V. SANCTIONS:**

**Matrix Adjustment History: Poor Effective Date: 7-8-10**

Rule	Category	Seg. Days	CR Days	CC/CS	Revoke GCC
112		250			120

SEG = Segregation CR = Cell Restriction CC = Concurrent CS = Consecutive GCC = Good Conduct Credits

☒ Override- State Reasons: In Jan. 2010 a 112 .

☒ Other Sanctions: Suspend visits mandatory fr. 7-12-10 for 1 yr. per DCDs for 2<sup>nd</sup> categ. I violation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## VI. RECEIPT OF HEARING RECORD:

Date of Hearing: 7/12/2010

Date of Violation: 7/8/10

Teleconferenced Hearing: Yes

Name and Title of Serving Staff:

B. Mable 7/12/10  
DATE

By signing I hereby acknowledge receipt of the hearing officer's decision:

Roger Terry 346-358 7-12-2010  
Rogel Terry #341358 DATE

Distribution: Institution  
Inmate  
Report Staff